THE

Medical and Physical Journal.

VOL. XXIV.] DECEMBER, 1810. [NO. 142.

Printed for R. PHILLIPS, by E. Hemsted, Great New Street, Fetter Lane, London.

To the Editors of the Medical and Physical Journal.

Remarks on the History and Use of Tobacco.

GENTLEMEN,

THE powers and the properties of the vegetable narcotics, either to destroy or to save, have been enough distinguished, to make those who wish for the improvement of medical science, lament that our knowledge of them is still so indeterminate, that it may be said to approximate to ignorance. Some of the properties of some of these substances, may have been tolerably explained; but of others, so little is ascertained, that they still remain, as to their influence upon the animal functions, in a state of great obscurity. On Opium, with which our acquaintance is most perfect, much has been written; with it many experiments have been made; and numerous observations respecting it have been recorded. But even of this substance, which is procured from the most familiar of this tribe of soporific plants, our knowledge is imperfect and unsatisfactory. Of the Digitalis our ignorance was profound, before the publication of Withering's pamphlet. Of the Solanums, Datura, Hyoscyamus, Conium, Cynoglossum, the Agarics, in some of their species, what do we know? We are certain, however, that many individuals of the LURIDÆ are absolute and direct poisons, but in a quantity short of the poisonous dose, they may be powerful remedies. If this is not a new fact, it is one of great importance, and deserves the most serious attention. All these plants, or parts and preparations of them, have, certainly, at various times, been employed as remedies; yet one misfortune has accompanied this employment. Either from some overweening partiality, or from some happy effect, accidentally perhaps produced, or connected with some unascertained cause, their patrons have given them a character above their deservings: and having always been found to fail in the performance of wonders, their

reputation has fallen into the other extreme; and that has been rejected as useless, whose powers were not found to be miraculous. But let us rather admit, as a more fair and rational conclusion, that these substances, when they have failed or been injurious, have been applied to unappropriate diseases; that their dose has been either too large or too small; or that there has been some circumstance in the case at their time of exhibition, unpropitious to their use. To ascertain which are the proper cases, what is the proper dose, or which the temporary symptoms that may forbid their use; and how those symptoms are to be removed before they are admissible, becomes the serious duty of the medical practitioner. Neither has it been determined, possibly not much considered, whether, if compounded with each other, in various proportions as well as kinds, a medicine might not be produced, having properties different in degree or quality; and, perhaps, more under controul than either of the separate substances.

These reflections have arisen from reading some observations upon Tobacco in your Journal for November, full of point, and where, possibly, "more is meant than meets the ear."

But, if I acknowledge the writer's talent, I am not compelled to submit to his conclusion, unless his argument convinces.—He is an enemy to TOBACCO, from having been disappointed, perhaps, in its expected effects, or from some latent prejudice; yet am I not without hope to shew, even to a descendant of *Joshua Sylvester*, that this plant possesses properties that may be employed with a fair prospect of being successful in the cure of diseases.

It has been the fate of the NICOTIANA TABACUM to have credulous and hyperbolical friends; enemies prejudiced, malignant, and unjust. With the one party it was the great *Panacea*,* the curer of every evil, the soother of every care.—With the other, it was a debaser of the human mind, enervated the body, and was fit only to be used by diabolical

* A book was written by Dr. Giles Everard, (a Dutch Physician, born at Berg-op-Zoom,) and published in 1583, with the title *De herba Panacea, quam alii Tabacum, alii Petum aut Nicotianum vocant, brevis commentariolus, quo admirandæ ac prorsus divinæ hujus Peruanæ stirpis facultates et usus explicantur.* Antverpiæ, 16mo. This passed through more than one edition, as will be noticed hereafter; and was formed into an English duodecimo, with the title of *Panacea*, &c. 1659. This last, when it has the portrait, in this portrait-mania age, sells for 15s.

spirits

spirits in Pandæmonium.* Both its friends and enemies were found in every rank of society, from the King to the peasant. Poets, priests, physicians, and moralists, were, by turns, its panegyrists and its defamers.

When the exalted genius of Columbus directed him to a new world, believed, by men of baser intellect, then to have no existence but in his own imagination; the wonders of the vegetable kingdom, both in external form and in peculiar properties, were not the least curious and valuable of his discoveries. The TOBACCO PLANT † grew in Cuba, and must

---

* That wise monarch, James the Ist, who, *gude mon*, was hardly quarrelsome on any subject but *Tobacco*, to which he had a mortal hatred, used to say, in his hours of relaxation, that this plant was the lively image and pattern of hell; (vid. a collection of witty Apothegms, &c. 12mo, 1671) for that it had, by allusion, in it all the parts and vices of the world, whereby hell may be gained: to wit, 1st, *it was a smoke;* so are the vanities of this world. 2dly, *it delights those who take it*; so do the pleasures of the world make men loath to leave them. 3dly, *it maketh men drunken and light in the head;* so doth the vanity of the world, men are drunken therewith. 4thly, *he that taketh Tobacco saith he cannot leave it, it bewitcheth him;* even so the pleasures of the world make men loath to leave them, they are so enchanted for the most part with them. And farther, beside all this: 5thly, *it is like hell in the very substance of it, for it is a stinking loathsome thing;* and so is hell." This quibbling sophist, concludes with, "Were I to invite the devil to dinner, he should have three dishes; 1st, a pig; 2d, a pole of ling and mustard; 3d, a *pipe of Tobacco* for digesture." Compared with the royal authour's "COUNTER-BLAST" this is tender mercy.

† I am aware an opinion has prevailed, that *Tobacco* grew in Asia, and was even smoked, long before the discovery of America. *Professor Beckmann*, of Gottingen, whose laborious researches into every species of literature, but especially those connected with physical science, and the invention of arts, are so well known and appreciated, says, (*Introduction to Technology*) the celebrated naturalist and traveller, Pallas, informed him, "that in Asia, and especially in China, the use of Tobacco for smoking was more antient than the discovery of the new world. Among the Chinese, and among the Mongul tribes, who had the most intercourse with them, the custom of smoking is so universal, and has become so indispensible a luxury; the Tobacco-purse affixed to their belt, so necessary an article of dress; the form of the pipes, from which the Dutch seem to have taken the model of theirs, so original; and, lastly, the preparation of the yellow leaves, which are merely rubbed to pieces and then put into the pipe, so peculiar; that we cannot possibly derive all this from America by way of Europe; especially as India, where the habit of smoking Tobacco is not so general, intervenes between Persia and China. May we not expect to find traces of this custom, in the first account of the voyages of the Portuguese and Dutch to China?" That celebrated traveller and philosopher ULLOA, observes (Voyage to South America, Vol. I. 139) "that it

have been early known to Columbus and his companions. In 1492, possibly, they were acquainted with it. Four years after this *Romanus Pane*, a Spanish monk, whom Columbus, on his second departure from America, had left in that country, published the first account of *Tobacco*,* with which he became acquainted in St. Domingo. But until there is better evidence than at present appears, it must be considered, that this account of *Romanus Pane*, and his publication on Tobacco, deserves little credit.

Hernandez de Toledo sent this plant into Spain and Portugal, in 1559, when *Jean Nicot*,† was ambassador at the court of Lisbon, from Francis the IId. and he transmitted, or carried, either the seed or the plant, to Catherine de Medicis. It was then considered, as one of the wonders of the new world; a proper present for a Queen; and was believed to possess extraordinary virtues. This is, probably, the first authentic record of the introduction of this potent plant into Europe; a plant which was afterward to be-

---

it is not probable the Europeans learned the use of Tobacco from America; for as it is very ancient in the Eastern countries, it is natural to suppose, that the knowledge of it came to Europe from those regions, by the means of the intercourse carried on with them by the commercial states of the Mediterranean sea. No where, not even in those parts of America where the Tobacco plant grows wild, is the use of it, and that only for smoking, either general or very frequent." After all, possibly, the Tobacco of Asia, the smoking of which is so antient a custom, is not the *Nicotiana Tabacum*, but the *N. fruticosa*, which nearly resembles it, and grows in China and Cochinchina, is cultivated every where in those countries, has its proper vernacular names, and is regarded as indigenous. In 1699, according to the Hortus Kewensis, N. fruticosa was cultivated here by the Duchess of Beaufort. If the practice of smoking Tobacco came from the East into Europe, why is there no account of it before the discovery of America?

* I acknowledge my ignorance of *Romanus Pane*, the Spanish monk, and of his account of Tobacco; and am indebted to *Schlozeres' Briefwechsel*, for the anecdote. Perhaps some of your learned correspondents may hunt this first writer on the Tobacco plant from his obscurity. If they are successful, it will show how early after the discovery of America, we became acquainted with this narcotic.

† *Nicot*, whose name is now only preserved from oblivion by having been given to an American weed, was a notary in the town of Nismes, in Languedoc; but having the good fortune to be introduced at Court, he became a favourite with Henry II. and Francis II. He was made a master of Requests, and was ambassador to Portugal, in 1559, 1560, and 1561. He died at Paris in May, 1600. His having first brought Tobacco into France, has occasioned his name to be inserted by Eloy, in the "*Dictionnaire Historique de la Medecine.*"

become

come the theme of poets, and the admiration of physicians: to be condemned by popes, and execrated by moralists.

The reputation of *Tobacco*, from this period, gradually spread throughout the European states. In 1565, Conrad Gesner,* the Pliny of Germany, became acquainted with it; and it was found in many gardens. In 1570, according to Lobelius (Hort. Kewensis) it was cultivated in England: though Sir Richard Baker (Chronicle, p. 400. Edit. 1696,) asserts, it was brought hither from the West Indies by Ralph Lane, in the 28th year of Elizabeth, 1586.† On this subject, Lobelius is better authority than this credulous chronicler. Baker's account, probably, applies to the smoking of *Tobacco*, and not to its first introduction. And this is still rendered more likely, by the English having, in 1585, first seen tobacco-pipes made of clay,‡ among the native Indians of Virginia; which was about that time discovered by Richard Greenfield. It appears that the English, soon after this, perhaps in 1586, manufactured the first clay tobacco-pipes in Europe. The Dutch, notwithstanding their dull preeminence in the art of using this narcotic, still smoked out of conical tubes, composed of palm leaves plaited together.

It now quickly made its way over the European continent. In 1575, a figure of the plant, given by André Thevet,§ in his *Cosmographia*, (and which, perhaps, was the first) made it more known, at least to those who entered into the botany of that time. In 1610, smoking tobacco was known and practised at Constantinople. But it seems, there, to have

---

* *Epistolæ Medicinales*, fol. 79, Nov. 5, 1565. He had then only learnt from Thevet, that it was used in America for smoking.

† Another account says, that Sir Francis Drake made tobacco known to the English in 1586. *Panacea*, p. 3.

‡ *Clusius* says, that the English returning from Virginia brought from thence tobacco-pipes made of clay, and since that time "the use of drinking (smoking) tobacco hath so much prevailed all England over, especially among the courtiers, that they have caused many such pipes to be made to drink tobacco with." *Panacea*. *Clusius* had been twice in England, was intimate with Sydney and Drake; and from the latter he procured many materials for his *Exotica*, printed at Antwerp in 1601. It cannot be doubted therefore, when he speaks of the prevalence of smoking in England, that he gives it on his personal knowledge.

§ Thevet (who was in that expedition, which, anno 1555, Nicolaus Durandus Villagagnonus made to Brazil) in his book called Antartick France, boasts, that he was the finder, and the first man that brought the seed of Tobacco into old France. *Panacea*, p. 6.

been

been considered as a new-fangled and foreign luxury; and something disreputable was attached to this mode of using it.* The progress of the cultivation and use of this plant throughout the German states, and in the Swiss cantons, is minutely traced in the work of Prof. Beckmann, before cited. In 1620, some Englishmen instructed the inhabitants of Zittau to smoke; and in the same year Konigsmann, a merchant, brought the first Tobacco plant from England to Strasburg. Two Jews attempted its cultivation in the Margraviate of Brandenburg, in 1676. In 1677 great quantities were grown in the Palatinate, and in Hessia. Vicarius,* an Austrian Physician, is said, in 1689, to have improved the common tobacco-pipe, by adding to it a tube which contained sponge, through which the smoke percolated; and was made grateful by an abstraction of a portion of its calorique, or rendered odoriferous by being impregnated with some perfume in its passage.—Smoking was a practice so novel in the canton of Appenzel, in 1653, that children ran after those who used a pipe in the streets. In short, Tobacco excited, wherever it came, the feelings, the passions, and the interests of mankind, in a most extraordinary degree. It gave alarm to both church and state. Religion and morality were thought to be endangered by its use; and the welfare, even the existence of society, was threatened by its cultivation.†

---

* It is related by *Beckmann*, that a Turk, who had been found smoking, was conducted through the streets of Constantinople, with a pipe transfixed through his nose. The Turks were late before they learned to cultivate the plant themselves; and continued a long time to purchase a refuse Tobacco (Mundungus) of the English. Now a very choice and expensive kind (Ellsham) is imported into this country from Turkey.

* Was this *Jean Jacques Vicarius*, a doctor in philosophy and medicine in the University of Fribourg in the Brisgau, and a Member of the Imperial Academy, (*Academiæ Naturæ Curiosorum*) in 1697, under the academical name, Anaximander, who was also a man of great ingenuity, and the author of several works on medical subjects!

† The extent to which the passion for Tobacco went, will afford a reasonable ground for the apprehensions that pressed upon the guardians of religion, morals, and the general welfare of nations. One of its early apologists says, "Seamen will be supplied with it for their long voyages; soldiers cannot want it when they keep guards all night, or are upon other hard duties in cold and tempestuous weather; farmers, ploughmen, porters, and almost all labouring men plead for it, saying they find great refreshment by it, and would as soon part with their necessary food as with Tobacco. The nobility and gentry, who find no fault with it, but that it is too common amongst the vulgar, do ordinarily make it the complement of their entertainments, and oftimes all their entertainment beside is a complement. Scholars use it much, and many grave and great

The effects produced by the *Nicotiana Tabacum* upon the intellectual principle, whether real or imaginary, are of a

---

great men take Tobacco to make them more serviceable in their callings. Tobacco is grown to be not only the physick, but even the meat and drink of many men, women, and children. In a word, it hath prevailed so far, that there is no living without it; that notwithstanding the vast plantations of it in the West Indies, *all our corn fields would soon be turned into Tobacco-gardens, were not men restrained from it by the civil magistrate.*" This was said of it in 1659. From the beginning of that century the Tobacco-mania was so violent, that it became necessary to restrain it by severe laws.

In 1604,* James the 1st. endeavoured, by means of heavy imposts, to abolish its use in this country. In 1619, this same monarch commanded that no planter in Virginia should cultivate more than 100lbs.†. Pope Urban the 8th published a decree of excommunication, in 1624, against all who took snuff in the church. Ten years after this, smoking was forbidden in Russia, under the pain of having the nose cut off. In 1653, the council of the canton of Appenzell cited smokers before them, punished them, and ordered innkeepers to inform against such as were found smoking in their houses. The police regulation of Bern, made in 1661, was divided according to the Ten Commandments. In it the prohibition to smoking stands immediately beneath the command against adultery. This prohibition was renewed in 1675; and the tribunal instituted to put it into execution (*Chambre au Tabac*) continued to the middle of the 18th century. Pope Innocent the 12th, in 1690, excommunicated all those who were found taking Snuff or Tobacco in the Church of St. Peter at Rome. Even so late as 1719, the Senate of Strasburgh prohibited the cultivation of Tobacco, from an apprehension that it would diminish the growth of corn. Amurath the 4th published an edict, which made smoking Tobacco a capital offence. This was founded on an opinion that it rendered the people infertile.

Whether these laws were all justly founded, or whether they arose out of prejudice, passion, or false opinion, they still shew the estimation in which Tobacco was held.

* The record of this impost, preserved in the 16th Vol. of the *Fœdera*, is valuable not only as a fact, but as an historical document, characteristic of the opinions that prevailed at the commencement of the 17th century. Its title is, *Commissio pro Tobacco*, wherein King James sets forth, "That, whereas Tobacco being a drug of late years found out, and brought from foreign parts in small quantities, was taken and used by the better sort, both then and now only as physick, to preserve health; but it is now, at this day, through evil custom and the toleration thereof, excessively taken by a number of riotous and disorderly persons of mean and base condition, who do spend most of their time in that idle vanity, to the evil example and corrupting of others, and also do consume the wages which many of them got by their labour, not caring at what price they buy that drug. By which immoderate taking of Tobacco the health of a great number of our people is impaired, and their bodies weakened and made unfit for labour. Besides, that also a great part of the treasure of our land is spent and exhausted in this only drug, so licentiously abused by the meaner sort. All which enormous inconveniences we do well perceive to proceed principally from the great quantity of Tobacco daily brought into this our realm, which excess might, in great part, be restrained by some imposition to be laid upon

character to interest curiosity, and excite investigation. To this part of the inquiry the elucidation will be afforded, principally, by the enthusiasm of the poets. Those of the *genus irritabile Vatum* who had felt its soothing influence, or had drank with delight of the wild reverie which its operation frequently produced, celebrated, in grateful strains, its potent virtues. Those who had rejected the insidious poison, execrated both the plant and its friends, if not with the courtly elegance of Horace, or the fire of Juvenal, certainly with a redundant portion of the virulence of Persius. Though fiction be the privilege of poetry, yet it has not unfrequently occurred that the poet has painted with a faithful pencil the manners and the customs of mankind; and the historian has transferred to his pages useful materials, collected with proper discrimination, from an art, the essence of which has always been considered as allowing a deviation from the plain path of truth.

Very early, before 1589, the cardinal *Santa Croce*, returning from his nunciature in Spain and Portugal to Italy, carried thither with him Tobacco. This circumstance is commemorated by *Castor Duranti*, in latin verses which lavish

---

upon it. Wherefore we command you our Treasurer of England, to order all customers, comptrollers, &c. of our ports, that from the 26th day of October next, they shall demand and take for our use, of all merchants, as well English as strangers, &c. the sum of six shillings and eight-pence in every pound weight thereof, over and above the custom of twopence upon the pound weight usually paid before."

† This proclamation for restraining the planting of Tobacco in Virginia, was followed by another in 1620, inforcing the former. The preamble to this latter places in a strong light the mortal hatred James had to this herb.—"Whereas we, out of the dislike we had of the use of Tobacco, tending to a general and new corruption both of men's bodies and manners; and yet, nevertheless, holding it, of the two, more tolerable that the same should be imported, amongst many other vanities and superfluities which come from beyond seas, than to be permitted to be planted here within this realm, thereby to abuse and misimploy the soil of this faithful kingdom; and whereas we have taken into our royal consideration, as well the great waste and consumption of the wealth of our kingdoms, *as the endangering and impairing the health of our subjects*, by the immoderate liberty and abuse of Tobacco, *being a weed of no necessary use*, and but of late years brought into our dominions. We therefore strictly charge and command that our proclamation, of December last, restraining the planting of Tobacco, be observed." In 1624, James strictly prohibited, by proclamation, the planting of Tobacco in England or Ireland. In 1627, Charles I. renewed this prohibition. In 1660, the first legal act of parliament was passed against planting Tobacco in England and Ireland. Opinions were now so far changed, however, that the corruption of manners, and the injury to health were no longer the ostensible motive, but the loss the colonies would sustain by it being grown at home—it was allowed to be grown in the physic gardens of the two universities, and in private gardens for surgery. After this, we no longer hear, in this country at least, of apprehensions for the health and morals of the people with regard to the use of Tobacco. All laws, either restrictive or promotive, have henceforward, a commercial object.

the

the most egregious praises on this plant: not only is it asserted to cure every disease, but the holy Cardinal's exploit is compared with that of his progenitor, who brought home the wood of the true cross.

" Hanc Sanctacrucius Prosper quum Nuncius esset
Sedis Apostolicæ Lusitanas missus in oras
Huc adportavit Romanæ ad commoda gentis,
Ut proavi Sanctæ lignum Crucis ante tulere
Omnis Christiadum quo nunc respublica gaudet,
Et Sanctæ Crucis illustris Domus ipsa volatur
Corporis atque animæ nostræ studiosa salutis."*

It is probable, especially at this time and in this place, and when thus introduced by a parallel between it and the wood of the sacred cross, that many superstitious and miraculous properties would be given to it. Possibly some of your correspondents of deeper research than I can boast, may discover that Tobacco was then employed in amulets and mystical sigils, consecrated with " muttered spells," to ward off contagion, perhaps to repel witchcraft, and the operations of evil spirits.

Animated as the eulogium of *Duranti* was, it sinks into nothing before the strains of *Raphaelle Thorius*, who, in a Latin poem (*Hymnus Tabaci*†) celebrates the properties of the *Nicotiana* in Virgilian numbers.

" Planta beata! decus terrarem, munus Olympi!
Non tantum agricolis duro lassata labore
Membra levas, minuis victus absentis amorem,
Fundis et absque cibo sparsas in corpora vires.

---

* ——————— Herb of immortal fame!
Which hither first with Santa Croce came;
When he, his time of Nunciature expired,
Back from the court of Portugal retired;
Even as his predecessors great and good
Brought home the cross, whose consecrated wood
All Christendom now with its presence blesses:
And still th' illustrious family possesses
The name of Santa Croce, rightly given,
Since they in all respects resembling heaven,
Procure as much as mortal can do,
The wellfare of our souls and bodies too.

† The intrinsic excellence as well as the scarceness of the *Hymnus Tabaci*, will be an apology for my extracting largely from it. The author, Raphaelle Thorius, who is now but little known, was a Frenchman, a doctor of the University of Oxford, and a physician in London, in the reign of James the 1st. where he died in 1629. The *Hymnus Tabaci* has passed through many editions: It was printed at Leyden, 4to. 1622, probably the princeps, and again, same place, 4to. 1623; and 1628. 12mo. Utrecht, 1644; and London, 12mo. 1651. Two letters "*de causa morbi et mortis de Isaaci Casauboni*," were likewise published by Thorius. With the classical elegance of style which Thorius cultivated *con amore*

But he assigns to it a much higher office than restoring the enervated body, or refreshing the wearied peasant's limbs.

"Sed radium specimenque Dei sapientibus ipsis
Ingenium illustras, si quando aut multa tenebras
Colligit ingluvies cerebro, aut nolimine longo
Intellectus hiat, rerum neque concipit umbras,
Conceptasve tenet, vel cœca oblivia regnant;
Ut semel irrepsit blando lux indita fumo,
Aufugiunt nubes atræ, curæque, tenaces.
Vis micat inventrix, dempto velut obice veli
Tota oculis animi patet ampli machina mundi,
Æternæ species naturæ ex ordine nexæ
Succedunt, redeuntque; suis simulacra figures."*

This general illumination of the mental principle, this intellectual sharpening to cut into the deep recesses of nature, until the *species æterna*, the secret stamina of the world st and exposed, is followed by a particularization of the operation of this herb on the orator and the disputant.

"O quoties visus magna spectante corona
Orator populi cupidas diuturnus ad aures
Contremuisse metu, docti sermonis acervos
Confudisse locis, lingua et silvisse rigenti

---

amore, he joined a devotion to wine and tobacco. He was the greatest bon vivant of his time, a hero of the bottle whom no man dared to engage:

——————"A doctor of tremendous paunch,
Awful and deep."

M. Peirese, one of the finest geniusses of the 17th century, being at a dinner in London, with some of the literati of that age, punished Thorius severely by compelling him to drink a large glass of water. Gassendus gives, very pleasantly, the history of this transaction. "Contigit ut in quodam virorum doctorum convivio, Doctor Thorius ipsi Peireskio ingenti Scypho præbiberit: Ac ille quidem se excusare, ob vastitatem pateræ; ob merum insolitum; ob imbecillem stomachum; ob compotandi infrequentiam: verum cum nihil admitteretur, petiit, ut saltem sibi liceret, postquam Thorio fecissit satis, suo arbitrio præbibere. Annuerunt omnes, ac tum assumptis, quasi adigente necessitate animis, fœcundum hausit calicem, eodemque mox aquâ oppleto, Thorio intentans præbibit, totumque rursus (tanquam injectum temperaturus merum) absorpsit. Ille quasi fulmine ictus, delapsusve è nubibus, vix tandem ad se rediit, et quia ex condicto agebatur, neque resilire fas erat, tam longa suspiria è pectore duxit, toties admovit, removitque ora, tot interea carmina ex omnibus Græcis, Latinisque poetis profudit, ut diem penè contriverit instillandæ aquæ in insuetum guttur." *Vita Peireskii. Lib.* 2.

* The Poet's fiction is almost realized by one of the most learned men of this country, (or of any other) being also its greatest smoker. We owe, *Raphaelle Thorius* would have said, the *sesquipedalia verba*, the sounding periods, and the lacerating keenness of Tracts by Warburton and a Warburtonian, to the influence of the *Nicotiana Tabacum*.

Quum

Quum memor ex tantis opibus sopita facultas
Nil daret in vocem, sed res et verba negaret,
Si modo vel micam generosa è stirpe vorassit
Fumanti tubulo, accenso seu lumine, sensim
Res reperisse suas, prendisse fugacia verba
Thesaurosque; animi populo exposuisse stupenti.

This is a lively picture of the confused and doubting orator, and of the sudden renovation of his faculties by this potent herb. With equal address is the disputant excited to keener contest by its influence; and when defeated, rising from its fumes, like Antæus when he touched the earth.*

The dominion of tobacco over the mind was not always manifested by that fictitious elaboration of intellect, on which this classic poet delighted to dwell. It was more frequently used to disturb the imagination, to produce that wild and savage enthusiasm, which among barbarous tribes is considered as a visible indication of a direct communion with the Deity.* The extacies thus produced were often extremely serious † in their consequences.

---

* "Si duo præterea Stagiræ in pulvere docto
Laudis amore novo, verive cupidine pulsi,
Pugnam agitant, verbis et degladiantur acutis:
Omne animi intendunt robur, nervosque fatigant
Nexibus impediant cautum ut subtilibus hostem,
Aut validum incusso rationem pondere sternant.
Stat circum pubes, pulchri & certaminis æquus
Arbiter ingenii æquales utriumque lacertos
Mirantur, crebris vires applausibus augent.
Tandem obtusa acie, ut fessis deferbuit ardor,
Lentior et validos insultus lucta remisit,
Sorbeat alterutur, sacrum refletque vaporem
Ilicet ut tactâ Antæus tellure, resurgit
Firmior, exhaustumque recens grassatur in hostem;
Jejunus cadit, at sequitur victoria potum.
Sin utrique placet nova de suffimine tela
Arripere, & calidam verbis producere pugnam:
Tum videas paribus momentis prœlia sæva
Eventu dubio in multam crudescere noctem;
Nec prius argutis discedere ab ictibus ambos,
Indefinitam abscindat quam tædia litem
Judicis incerti, palmæ cui prœmia donet."

* The aborigines of America, according to Harriot's description of them, cast powdered tobacco into their sacrificial fires, believing it grateful to their gods. The priests of some tribes swallowed the smoke of this plant to excite the spirit of divination; and this they did to a degree that threw them into a stupor of many hours' continuance. When recovered from this paroxysm of drunkenness, they asserted they had

In its operation on the intellects of the inhabitants of Europe, Tobacco was not observed to produce any of these effects. Sottishness, indolence, and torpor, when it was employed to excess, were the common result. By an extravagant fondness for it, men became ruined in their fortunes,* bankrupt in reputation, imbecile in mind, and emasculate in body.†

That this was the opinion held most earnestly by some persons, both history and their existing works afford abundant proof.

Among those who have in this country drawn the pen against *Tobacco*, James the First claims the place of honor, both from his rank, and the energy of his Philippic. The "COUNTER-BLAST TO TOBACCO," (the quaint Title to

---

had conferred with the devil, who had shewn them the course of future events. Their physicians also get drunk with this smoke, and relate, that while under this intoxication, they are admitted to the counsel of their gods; who reveal to them the event of diseases.

† Monardes says, that the servants and the Moors (negroes perhaps) who came into the West-Indies, took such delight in smoking tobacco, that they appeared to lie as dead from its use, for several hours; and that sometimes they grew so mad with it, as to kill their masters. It is a curious fact in the history of man, that producing a maniacal disturbance in the brain and nervous system by fumigation, is a practice of great antiquity. The Scythians when they desired to be intoxicated, and yet, in compliance with some custom or law, abstained from wine, cast bundles of herbs into the fire and inhaled the smoke, which produced the effect. (Alexander ab Alexandro, and Max. Tyrius.) The Thracians produced the same effects by the smoke of the seed of some plants. (Pompon. Mela and Solinus.) The Babylonians, according to Herodotus, employed similar means to produce intoxication.

* King James asserts, (Counter-Blast) that some persons spent 4 or 500l. a year in tobacco; an enormous sum for that time.

† These are the heavy charges brought against this herb by its enemies, whether verse-men or prose-men. They are not, however, warranted by observation, in the present day. That sedate, sober, and capable men smoke tobacco, almost incessantly, must be known to many persons; neither do their mental or physical powers suffer by it. The drunkard smokes, but his pipe is a mere appendage to his pot. Observation leads to a conclusion that there are more sober than drunken smokers. Smoking does not appear to be quite so innocuous in America; for there, says a modern traveller, (Janson's Stranger in America, 4to. 1807) children smoke *segars* to so immoderate a degree, that death has been the consequence. This, he adds, is fully elucidated by the following paragraph, copied from a late newspaper, printed at Salem, in Massachusetts:

"*Died*

the royal Penman's production) is both argumentative and declamatory. Four propositions, or reasons for indulging in the use of Tobacco, are stated as the usual grounds of its defence; and argued against fluently enough, according to the scholastic method of that day. Two of the propositions are stated as theoretical, and two are experimental. The theoretical are, 1st, "It being a sure aphorism in Physick, that the brains of all men being naturally cold and wet, all dry and hot things should be good for them; and therefore this stinking fumigation must be useful." The 2d is, that "this filthy smoke, as well through the heat and strength thereof, as by a natural force and quality, is fit to purge both the head and stomach of rheums and distillations, as is proved by spitting and voiding of phlegm." The experimental grounds of the defence of Tobacco are, 1st, "That people would not have taken so general a good liking to it, if they had not by experience found it sovereign and good for them." 2d, "That divers and very many men do find themselves cured of divers diseases, as on the other part no man ever received harm thereby." With the first propositions, being purely and ridiculously hypothetical, there was not much difficulty: with the second, as being founded on the experience of mankind, more ingenuity must be employed. The argument is managed with some dexterity, and turns on taking *non causam pro causa.* We have to lament, that this still happens in deducing conclusions from

---

"*Died in Salem, Master James Verry, aged twelve, a promising youth, whose early death is supposed to have been brought on by excessive smoking of segars.*"

That this pernicious custom was habitual in an infant, not four years of age, Mr. Janson says, he was himself a witness. This little boy is the son of Thomas Taylor, a segar-maker, in Alexandria, near Washington. While conversing with the father, our author observed the son smoking a large segar, made of the strongest tobacco. On expressing his astonishment, the infatuated parent replied, that the child had contracted the habit above a year before, and that he smoked three, four, or more daily: in fact, the child was seldom without a lighted segar in his mouth, and yet he was fat and healthy. (p. 297.) In these two specific instances the evidence is so poised as to be quite indecisive. A boy twelve years old was killed by smoking segars; a child of four years old grows fat and is healthy, under the same practice. Professor Waterhouse, in a public Lecture on the Preservation of Health, (Nov. 1809) at Cambridge, in New England, speaks of tobacco as a treacherous enemy that is secretly doing much mischief; but hesitates to attack it on account of the popular opinion being so greatly in its favour.

premises

premises not well understood. After declaiming against Tobacco on its uselessness as a medicine generally, its injury to the frame when in health, and on the profusion of expense its use incurs, the royal author thus concludes the *Counter Blast* :

"Have you not reason then to be ashamed," said he, addressing his subjects, "and to forbear this filthy novelty, so basely grounded, so foolishly received, and so grossly mistaken in the right use thereof. In your abuse thereof sinning against God, harming yourselves both in persons and goods, and taking also thereby the marks and notes of vanity upon you; by the custom thereof making yourselves to be wondered at by all foreign civil nations, and by all strangers, that come among you, to be scorned and contemned :* a custome loathsome to the eye, hatefull to the nose, harmeful to the brain, dangerous to the lungs, and in the black stinking fume thereof, nearest resembling the horrible Stygian pit that is bottomless."

King James mingled with his argument and his declamation, a plentiful seasoning of abuse. By him, and other writers of this period, who attacked Tobacco, it was constantly likened to the infernal regions. The smell of its smoke was even diabolical, and its effects were compared to the influence of the evil spirit.† Among others who wrote

---

* From hence, it may be inferred, that tobacco was, at this time, more used by the English than by other nations. Camden (*Life of Elizabeth*) says, that soon after the introduction of tobacco by the companions of Ralph Lane, it began to grow into great request, and to be sold at an high rate, whilst, in a short time, many men every where, some for wantonness, some for health sake, with insatiable desire and greediness, sucked in the stinking smoke thereof through an earthen pipe, which they presently blew out again at their nostrils; insomuch, that tobacco-shops are now as ordinary in most towns, as tap-houses and taverns. So that Englishmen's bodies, which are so delighted with this plant, seem, as it were, to be degenerated into the nature of barbarians. "Tobacco, in our age, " says Lord Bacon," is immoderately grown into use, and it affects men with a secret kind of delight, insomuch, that they who have once inured themselves to it, can hardly, afterwards, leave it; and, no doubt, it hath power to lighten the body and to shake off uneasiness."

† Sylvester compares the invention of gunpowder with smoking tobacco, of guns with tobacco-pipes! and adds, they were "*vented* from the infernal pit:" but thinks worse of tobacco than of gunpowder, because its operation is more insidious. Tobacconists he denominates idolaters; and, to end in an abusive climax on the smoke of tobacco, he introduces the following curious doggrell catalogue :—

There

from a conviction of their own mind, or to flatter the prejudices of the monarch, *Joshua Sylvester* is most conspicuous. By his brethren of Parnassus this poet was called the silver-tongued Sylvester; and, perhaps, some passages in his translation of *du Bartas* entitle him to an epithet which could not have been allowed him, had his claim been founded only on the quibbling doggrell of the *Tobacco Battered.* Queen Elizabeth, it is said, had a great respect for the silver-tongued poet; King James had a greater; and Prince Henry greatest of all; who valued him so much, that he made him his first poet-pensioner. It ought not to be concealed, "that he was renowned by his virtuous fame; and by those of his profession, and such as admired poetry, esteemed a saint on earth, a true Nathaniel, a christian Israelite." But having been too boldly severe on the vices of the times, he was obliged to leave his native soil, and died at Middleburg, in Zealand, in 1618, at the age of fifty-five*. The *Tobacco-Battered,* allowing for poetical exaggeration, shows the extent of the influence this plant had attained; and how devoted the majority of mankind was to its soothing properties.† Ben Johnson, who was the friend of Sylvester,

---

There is first the *smoak* of Ignorance,
The *smoak* of Error, *smoak* of Arrogance,
The *smoak* of Merit super-er'gatory,
The *smoak* of Pardon, *smoak* of PURGATORY,
The *smoak* of Censing, *smoak* of *Thurifying*
Of Images, of *Satans Fury-flying,*
The *smoak* of Stewes (for *smoaking* thence they com,
As horrid hot as torrid *Sodom,* som):
Then *smoak* of *Powder-Treason, Pistols, Knives,*
To blow up Kingdoms, and blow-out Kings lives;
And lastly too TOBACCO's *smoaking-mists,*
Which (coming from *Iberian* BAALISTS)
No small addition of Adustion fit,
Bring to the smoak of the *unbottom'd* pit.

* Anthony Wood (*Athen. Oxon.*) the quaint biographer of this quaint poet, speaks of his head and heart in the highest terms of commendation. "He was very pious and sober; religious in himself and family, and courageous to withstand adversity: also he was adorned with the gift of tongues, French, Spanish, Dutch, Italian, and Latin." But he had not learned John Gay's prudential maxim,

"When you censure the age,
"Be cautious and sage,
"Lest the Courtiers offended should be."

† "O Great TOBACCO! greater than Great Can,
Great Turk, Great Tartar, or Great Tamerlane!
With Vultur's wings thou hast (and swifter yet
Than an Hungarian Ague, English Sweat)

Through

hurled his classic thunder against Tobacco; and never let pass an opportunity to abuse it. On all the modes of taking it, whether smoking, snuffing, or chewing, the poets have employed such punishment as the muse could inflict*. Neither have moral writers, nor even physicians been sparing of their censures.† But all objections have gone only to its indiscriminate use, or rather its abuse; and in no degree affect its character as a medicinal substance. A writer of the period when Tobacco was at the acmé of its influence, has brought together, into one paragraph, all its virtues and its vices, in a manner peculiar to himself.

"*Tobacco*, divine, rare, superexcellent Tobacco, which goes far beyond all their panaceas, potable gold, and philosophers stones, a sovereign remedy to all diseases. A good vomit, I confesse, a virtuous herb, if it be well qualified, opportunely taken, and medicinally used; but, as it is commonly abused by most men, which take it as tinkers do ale, it is a plague, a mischief, a violent purger of goods, lands, health; hellish, devilish and damned Tobacco, the ruine and overthrowe of body and soul."

With this curious summary of honest Burtons, I must conclude these miscellaneous Remarks on a Plant, whose dominion over mankind has been, for a period, most extensive; and trust to your indulgence, for the insertion, in your next number, of some observations on its *Botanical and Medical History*.

MEDICUS.

November 15, 1810.

Through all degrees flown far, nigh, up and down;
From Court to Cart; from Count to Country Clown,
Not scorning Scullions, Coblers, Colliers,
Jakes-farmers, Fidlers, Ostlers, Oysterers,
Roagues, Gypsies, Players, Panders, Punks; and all
What common Scums in common Sewers fall."
For all, as *Vassals*, at thy neck are bent,
And breathe by Thee, as their new *Element*!

* The Apostolic muse of Samuel Wesley thus attacks snuff-taking:
"To such a height with some is fashion grown,
They feed their very nostrils with a spoon.
One, and but one degree is wanting yet,
To make our senseless luxury complete;
Some choice regale useless as *snuff*, and dear,
To feed the mazy windings of the ear."

† Silvius de la Boe, and Kirkringius, were hostile to this plant; but the particulars of their hostility belong to its medical history.

To the Editors of the Medical and Physical Journal.

Dr. Clarke on Calomel in Fever.

GENTLEMEN,

Verdun, 18th October, 1810.

ON lately reading several publications on Diseases of the West-Indies, I have been extremely astonished at the quantities of calomel that have been often prescribed in the yellow fever; and still more astonished that several hundred grains of calomel have been frequently exhibited in the space of one, two, or three days, without producing any visible effect whatever. However, the same authors also acknowledge that violent salivations occasionally occurred, and reduced their patients to extreme debility, and that in these cases the only probable remedy was the removal to a more temperate climate. If they had likewise confessed that death had been frequently occasioned by the administration of such enormous quantities of calomel, I firmly believe that they would not at all have deviated from truth. But the death of these unfortunate *mercurial victims*, I presume, must have been ascribed to the violence of the yellow fever.

As I wish to avoid controversies, I shall not mention names, and *solemnly avow* that the remarks contained in this letter do not proceed from personal motives—but merely from a desire to benefit mankind by cautioning strangers against the too copious use of calomel in warm climates. Having practised both in the West and East-Indies, I hope my observations will not be deemed impertinent.

While in the West-Indies, I neither prescribed, nor knew of mercury having been administered in very large quantities in the yellow fever. However, I assert, that venereal patients, or those afflicted with hepatic dysentery, are there as easily affected by calomel as in any other climate whatever.

Since the latter end of 1795, I have been in the almost constant practice of prescribing a combination of calomel and James's powder, or some other antimonial preparation, in the incipient stages of fevers; and I do not hesitate to declare that when I have only administered 12 grains of calomel, that in 24 or 48 hours afterwards, I have frequently perceived its effects distinctly in the mouth. And in the more violent cases of fever, particularly in the East-Indies, when I have administered 18 grains of calomel in the space of three hours, I never knew an instance in which the effects of mercury on the mouth were not distinctly perceived in from

12 to 36 hours, unless when vomiting or intense purging soon took place.

Hence it must appear evident, that the result of my experience, which has been tolerably extensive, is very different from that of the West-India Practitioners alluded to. And as the constitutions of my patients, I have every reason to believe, differed very little from those of their patients, I am of opinion that there must be some reason for the very different result of our practice.

When I joined his Majesty's 65th regiment, in 1790, as Surgeon's Mate, Mr. S. S. Wilson, then Surgeon to the regiment, (now Inspector of Hospitals) informed me that if I did not either administer the medicines to the soldiers myself, or entrust their administration to some confidential person, that I should be very often deceived by them. I was soon convinced of the truth of Mr. Wilson's assertion; and afterwards during my residence in the army, I adhered strictly to the instructions he gave me; and I do not hesitate to say, that if I had not done so, I should have been often the dupe of the soldiers, *and probably might have had it in my power to relate many cases of the inefficacy of prodigious doses of calomel, or of other powerful medicines.* What tends still further to confirm me in this opinion is, that the West-India authors alluded to, generally administered the calomel in pills. Whether their administration was generally intrusted to the patients themselves, or to nurses and orderly men, does not appear. But supposing that the attendants administered the pills, even then the soldiers might very easily deceive them by concealing the pills in their mouths, &c. This I know to be a common practice amongst seamen and soldiers. Indeed, when we take into consideration the direful effects of mercury to which the soldiers must have been often eye-witnesses, it is not surprising that they should have occasionally endeavoured to deceive their attendants.

When in the East-Indies, I likewise have frequently heard of immense quantities of mercury having been given on certain occasions, &c. I well remember to have heard a physician of respectability declare, that in the course of 24 hours a patient of his own had taken an ounce of calomel before his mouth was affected!

I am aware that many may think these remarks strange, or even illiberal. However, as the result of my practice, which I again mention, has been pretty considerable, has been so very different from that of many others; I hope these gentlemen in particular, and the public at large, will in some measure pardon the observations I have made.

I am, Gentlemen,

THOS. CLARK, M.D.

To the Editors of the Medical and Physical Journal.

Conclusion of Benj. Brierley's Case (with a Plate.)

Gentlemen,

As the patient whose case I drew up for insertion in your valuable Journal, in March 1809 (Vol. xxi. p. 225) is since dead, the remaining narrative of his sufferings, and the morbid appearances on dissection, may, perhaps, be a gratification to some of your numerous readers.

After the accidental discharge of hydatids from the bladder of my patient, his miseries were much relieved, and during the following months of winter and spring he enjoyed a tolerable state of health, partaking of some social enjoyments with a relish that he had once thought for ever gone; subsequently he was often distressed with a difficulty of micturition, and was sometimes obliged to strain so forcibly as to push down the rectum very considerably, and the consequence was hæmorrhage. There was not at any time since the discharge of hydatids, a total suppression of urine, but the flow was often not more than guttatim. As the summer advanced and winter approached, his symptoms assumed a more and more serious aspect, until I was again requested to visit him on the 6th of December, sixteen months from the time I first saw him. During several days he had suffered exceedingly; his efforts to make water had occasioned great discharges of blood from the rectum; his pulse was very feeble, and beat about 90 strokes in the minute; hiccup and spasmodic affections throughout the body troubled him very much; particularly affecting the muscles of the abdomen. By examination with my hand, the bladder was distinctly discernable, and seemed as though it contained some urine; I introduced the catheter, and drew away about three ounces; ordered him a draught with emuls. olei. amygdal. and tinct. opii gutt. xv. every two hours, also his belly to be fomented with warm water.

December 7th. Symptoms more violent. There is at times a profuse hæmorhage during an attempt to make water; spasms very severe, drawing up the muscles of the abdomen into a hard tumor, nearly the size of an infant's head. Ordered him æther, camphor and assafœtida, with tinct. opii gutt. xxv. every two hours, and to be put to the neck in the warm bath.

8th. Enjoyed some relief while in the bath, and a short time after; but the spasms speedily returned with very great

 violence;

violence; he has had no sleep, pulse feeble and irregular; voids his urine involuntarily in very small quantities: continue his medicine with gutt. xxx. tinct. opii and the warm bath as before.

9th. This day I could not visit him, being detained by a case of midwifery; he therefore continued the use of his antispasmodics.

10th. Spasms, if possible, still more violent, agitating the whole body with great severity: pulse very feeble, fluttering, and intermitting: discharge of blood from the rectum almost continual; his feet cold. Continued his antispasmodic medicine, with tinct. opii gutt. xxxvi.

11th. Died this morning about two o'clock.

13th. By permission of his friends, I proceeded to open the body, a medical friend being present, together with Mr. B. before mentioned (Vol. xxi. p. 226). On laying open the abdomen, the viscera had a healthy appearance; there was a considerable accumulation of fat surrounding the bladder and kidneys; the rectum was somewhat thickened, and the blood-vessels ramifying on it charged with blood. I dissected away the bladder, making the incision to include the prostate gland, (Plate *a*) which was much enlarged. I then laid it on a table, and opened it from the neck to the fundus, which displayed at once the ragged remains of the sac, (*b*) which contained the hydatids, pendulously attached about two inches from the neck of the bladder, the coats of which (*c*) were thickened to about an inch and one-eighth; the inner surface was sacculous, (*d*) and contained about two ounces of a brownish-coloured, thick gelatinous fluid. I next proceeded to take away the kidneys, and opened one of them longitudinally; its pelvis was so much enlarged as to admit a moderate sized hen's egg; the ureter as it departed immediately from the kidney was proportionally wide, and further on its approach towards the bladder was sufficiently capacious to admit my little finger within it. Mr. B. will doubtless feel the importance of this case, pointing out the great necessity of weighing in his mind with much deliberation the obscure symptoms of disease which do sometimes occur, and of investigating cautiously so as to be decidedly confident of the real nature of the complaint. Lamentable indeed must the conclusion of the present case have been, had the operation of lithotomy been performed, and truly degrading to the present enlightened state of medical science!

JOHN KENWORTHY.

Dobcross, Yorkshire, October 16, 1810.

To the Editors of the Medical and Physical Journal.

Scarlatina Anginosa Maligna.

GENTLEMEN,

SCARLATINA Anginosa Maligna having made its appearance in its very worst forms, in a large district round Debenham, in Suffolk; I take the liberty of sending you the particulars attending several fatal cases, with the general plan, and medicines employed.

The first case appeared at Debenham in February last, commencing with a cold shivering fit; enlarged and ulcerated tonsils, surrounded with an erysipelatous purpley inflammation attended with grey coloured spots; in a day or two, the scarlet eruption appeared about the neck, face, and bosom, and afterwards extended to the extremities, and generally accompanied with stiffness and tumefaction of the wrists, fingers, ancles, and toes. Pain of the head and back, and very distressing heat, were the most usual symptoms complained of, together with great prostration of strength, and faintness, want of sleep, and a low tremulous pulse, from 110 to 140 in a minute.

On the 15th of April last, I was called to Mr. Pooley, a stout fat man of about 34, who was well and about his business on Friday, was taken in the evening with a rigor and sore throat, which, on examining was found with greenish spots, inflamed tonsils, with ill-conditioned ulcerations.

His skin was red, spirits and strength fallen, pulse low, and 115. Fumigations with vinegar, gargles with myrrh, cinchona and muriatic acid; sponging the surface with vinegar and water, were immediately and actively applied; an emetic and a calomel purge were immediately given, together with strong decoction of cinchona, serpentaria, aromatics, muriatic acid, and oxygenated muriatic acid. The danger being imminent, the pulse low, and the patient sinking, wine, and occasionally brandy, were given. He had every advantage from attentive nursing, a large well aired and ventilated room; but sunk under the disease on the 4th day, and in a few hours the strongest marks of putridity, and indeed rottenness, attended the dead body.

Mr. K———, a respectable farmer, was well at a friend's house, on Monday, the 30th of August; on that day, he had a cold chill and soreness and stiffness of his throat; on Tuesday was worse; on Wednesday complained of head-ache, pain of his back, great loss of strength, scarlet eruption, pulse

low,

low, tremulous, and 120. Calomel and an emetic were first given, and then antisceptics, acids, fumigations, &c. &c. as in the first case, were boldly tried, but without effect; we having the mortification to see him die on the 4th day, in the 31st year of his age.

Mr. Garnham, 30 years of age, was at work on his farm, on Tuesday the 2d of August, was chilly on Wednesday; his throat being stiff and sore, he rode three miles for an emetic, was worse on Thursday, throat swelled, and much ulcerated, tongue and fauces very foul, distressing head-ache, pulse 140, urine high-coloured, and countenance yellow, which more or less was the case with most of those who had the disease in its worst form.

He died on the 5th day, and the body almost immediately became putrid and rotten.

I forbear reciting more of these melancholy cases, of which we have had but too many; some, even children, have died in 48 hours from the first attack. All the Surgeons for ten miles round, have had to attend Scarlatina Maligna in a variety of cases, in all ages from infancy to 50 or 60 years, and all have had their share of losing their patients.

The disease appears in various forms, from the slightest affection, with little or no sore throat or eruption, to the very worst and malignant type, which seems to baffle all attempts at stemming its violence. Mr. Torrence's cases of Scarlatina in your 185th No. appear of a milder kind, and much less formidable than many of those we have encountered, or cold effusion could scarcely have stemmed the course of the disease; and indeed, however valuable Dr. Curry's plan may be in Scarlatina, or other fevers, unless it was *infallible*, country practitioners dare not put it in use to its *fullest extent*; for if two or three lives of any consequence were lost after trying it, all the relatives, nurses, and prejudiced persons would exclaim against the Physician and Apothecary as murderers and barbarous practitioners.

The best writers on the putrid malignant sore throat, from Sydenham, Pringle, &c. down to Dr. Hooper, advise the tonic, antiseptic, aromatic, ascessent, and cordial plan, which have been tried most vigorously in a number of cases, not forgetting blisters over the throat. For children, and those that could not use the gargle, or admit of syringing, a linctus was ordered with mel. borac. alum. rup. pip. cayen. and acid. muriat. The state of the bowels was carefully attended to in all, and in some cases, injections of decoct. cinchon. vin. rubr. R. opii and acet. were administered by the bowels.

Although the mortality has been greater than I can recollect

lect in the course of the last 40 years, we have the pleasure to record the escape of by very far the greater number of the afflicted with Scarlatina Anginosa. The best writers on this cruel malignant fever, and the most able practitioners of my acquaintance, many of whom I have met, all concur in advising the tonic and antiseptic plan, which has been actively employed, modifying it according to the circumstances of the different patients, and degrees of malignancy attending; but I am truly sorry to say, without the wished for success in too many, or indeed, without any marked benefit at all in several.

This disease has in some instances afflicted whole families, with various degress of malignancy, from a slight sore throat to the highly putrid, causing death. In others, a part only have the disease at all. Many families are now suffering in different spots around this country, that appear to have had no communication with the afflicted. In one family, a child fell ill with Scarlatina, in its mildest form; the father, mother, and another child, fell down on the seventh day from the first: the father died, the others recovered. Since writing the above, I was called to a Mr. Rose, whose wife died of Scarlat. Ang. Malig. two days before; her body was so highly putrid, that the house was hardly bearable. Rose's symptoms were truly alarming from putrid ulcers in the throat, scarlet eruption, low quick pulse, and delirium, with two children in the same dangerous state, but those all recovered after the most severe struggle. Your medical friends will do the profession and the public the greatest favour, if they will point out in your next Journal, a more proper and successful mode of treating the Scarlatina Anginosa, under the highly malignant and rapidly destructive form it has assumed in this spot. Indeed my troubling you with this hasty sketch, is chiefly for the purpose of soliciting advice and instruction from the more learned and able, than,

Gentlemen,

Your obedient Servant, &c.

WILLIAM GOODWIN, Surgeon.

Earlsoham, Framlingham, Suffolk.

P. S.—*Oct.* 22, 1810.—This malignant fever still rages around us; many dying in 48 hours after being attacked.

To

To the Editors of the Medical and Physical Journal.

On reducing Dislocations.

GENTLEMEN,

THE following remarks on dislocation of the limbs have occurred, on reading a very interesting paper on the subject, published in the Medical and Physical Journal in April, 1808. After offering some very sensible strictures on the present mode of reducing luxations, in counteracting, by violent extension, the resistance of the muscles, (as he emphatically terms it) *by main force of surgery;* Mr. Carwardine proposes to apply a regular and long continued extension, to exhaust their action. This he illustrates by the following case.

A strong muscular man dislocated his shoulder. Attempts to reduce it were ineffectually made in the country where the accident happened; and after an interval of fourteen days, he applied to an hospital which Mr. Carwardine was then attending.

One of the senior surgeons proceeded to the reduction of the joint. After repeated and violent attempts, which proved ineffectual, it was proposed to the man to remain in the hospital till the following day, and in the interim, that he should lose blood, take a cathartic, and keep a relaxing poultice on the joint. His business, however, not allowing of a longer continuance in the hospital, he was about to quit it, when Mr. Carwardine persuaded him to go to his lodgings. Having provided the necessary apparatus, the patient was placed on a stool, the scapula and trunk firmly fixed, and a set of pullies accurately adjusted and secured to the condyles of the humerus, for the purpose of making extension. The cord was now tightened with a force just sufficient to counteract the gravity of the limb, and prevent its falling to his side. Mr. W—— with one hand held the wrist, to preserve the fore arm bent, and with the other held the cord to keep it from relaxing, but without tightening it. This extension was continued for ten minutes, without producing any manifest effect. As the extension gave very little pain, it was slightly increased. In five minutes more the man grew very restless, would not allow that he then suffered pain, but said, *he felt very faint*, begged that Mr. C. would desist, and asked for water, which was refused, under the idea, that if he fainted the muscles would be completely relaxed. At this moment he changed countenance, and the Deltoid muscle was perceived to be tremulous. The cord was tightened a little: the arm followed it; the cord being

now relaxed, the head of the bone slipped into its place, and the reduction was accomplished without any perceptible sound.

Mr. Carwardine attributes the success of this experiment to the long continued extension, having exhausted the action of those muscles connected with the dislocated limb; but from cases which have occurred in my practice, it seems more probable, it was the effect of that disposition to faint, which the man complained of towards the latter end of the experiment. In a state approaching to syncope, the circulation becomes weak, the action of all the voluntary muscles is nearly suspended, and if at that favourable moment, an extension could be made in cases of dislocated bones, I believe it would be generally successful. Surgeons who have seen much of practice must have remarked, when they have been called to patients who have suffered these accidents in a state of intoxication, with how much comparative ease, the reduction has been accomplished. In this state all the powers of the body are enfeebled, and the muscular action, for a time, almost destroyed.*

Previous to the action of an emetic, the face becomes pale, and faintness is generally induced. At this critical time, if an extension is made, the reduction of luxated bones is accomplished with a facility, that will surprise those who have not seen the experiment. When cases have occurred in my practice, which have resisted the common methods of reduction, I have ordered an antimonial emetic, and making an extension when the patient first complains of faintness or sickness, have always succeeded, and with very little exertion of force.

Mr. Lloyd, aged about forty, a very strong and muscular man, dislocated his shoulder by a fall down a precipice; as it was late at night, he got no assistance till the following day. At seven o'clock in the morning, an eminent surgeon of this city, was called to him. The trunk of the body was firmly fixed to a wall, and extension made from the lower part of the humerus, with the fore-arm bent, without success. Pullies were then applied, and much force used, but the head of the bone was immoveably fixt. Extension was then made in every direction in vain. These experiments were reiterated during the space of an hour, till the patient and the surgeon were both much exhausted. At eight o'clock, I was called into consultation, and proposed,

* Mr. Chesher has published a case, in which the reduction of a luxated Os Humeri was facilitated by the exhibition of emetic Tartar. Med. Journal, Vol. 8, p. 189.

470 - 471 PAGES MISSING IN BOOK

in this than any other class of men. This circumstance, with the many obstacles which oppose a productive establishment in business, especially when the practitioners are young, often prevents them from making suitable provision for their families in case of death. And if to these circumstances it be added, that they are from the nature of their profession particularly exposed to contagion, and other causes of disease, more arguments need not be urged to enforce the necessity of promoting some scheme to alleviate the distress of the families of medical men, when death deprives them of a husband or father."

The truth and justice of these observations have been fully confirmed by what has occurred among the members of this society. Since its establishment in 1788, 97 deaths have happened, which have occasioned applications for relief from 21 widows and families of the deceased: so that though, in the list of deaths are the names of many men who entered into the society solely from philanthropic motives, and without any view of future advantage to their own families, yet it appears that the families of more than one in five of the members have been left in circumstances of penury and distress.

To declaim upon the vicissitudes of life is easy, for they are of daily and hourly occurrence; and there can never be a want of materials to him who wishes to enlarge upon this subject. Among the widows and orphans who have been compelled to seek relief from the beneficence of this society, many melancholy examples of this nature might be collected. Men who have entered into professional life with the fairest prospect of success, whose wives and children have been accustomed to a degree of gentility and elegance, and who have reasonably expected a continuance of comfortable enjoyment, have suddenly been arrested by death, and their families have only been saved from the parish workhouse by the assistance of this society.

And yet assistance has been afforded to those only, who were left in a state of the most miserable penury; for till of late, the widows and orphans of no member were entitled to receive assistance, if from the effects of the deceased, the poor pittance of thirty pounds a year could be scraped together for the widow, and ten pounds a year for each of the children.

Happily the society is now in a condition to be more liberal; but with the prospect before it of a great accession of claimants in the course of years, it is not possible to do so much present good as it wishes. Its funds must still be economized with the most scrupulous regard to future calls upon them; for it has been calculated that in less than thirty years, it will be obliged to distribute, annually, upwards of *one thousand pounds*, among the widows and orphans, even supposing that the average allowance to each family should be only 25l. per annum.

This

This society possesses advantages which do not belong to common benefit societies; for as there are among the members, a great many who can never want any assistance from it, so there is more to be distributed among those who really do require it, and the fine of admission and annual contribution is consequently very much smaller than could otherwise be possible. In fact the indigent members of this society, by the payment of *only two guineas* a year, are entitled to greater advantages than they could enjoy in other societies of the same kind, by the payment of a much more considerable annual contribution.

That a judgment may be formed of the advantages which have resulted to some of the widows and orphans of members, I will just mention that the families of twelve members who altogether paid only 125 guineas in contributions, have received collectively, the sum of 2340l., and the majority of these twelve families are still receiving the assistance of the society. Among these are the orphan children of a surgeon, who was only one month a member, and who only paid two guineas, yet to his family has been paid by this society the sum of 390l.

	l.	s.	d.		l.	s.	d.
A Physician paid .	3	3	0	His widow has received	390	10	0
An Apothecary paid	5	5	0	His widow has received	252	10	0
A surgeon paid . .	7	7	0	His widow has received	135	10	0

That a society so well constituted, and so abundantly useful, should be enabled to extend its powers of doing good, must be the wish of all men; and I am persuaded that its principles and its practice require only to be more known, in order to render the number of its members much greater.

There are three classes of medical men in London and its environs, for whom I cannot imagine any excuse, if they do not become associates in this excellent institution.

1st. Those who know that their circumstances are unfortunately so low, as to allow very little chance of their leaving their families any adequate support. For the small sum of *two guineas* annually, and a very moderate fine on admission, they may become joint proprietors in a fund which at present amounts to nearly 18,000l., and which is progressively increasing. And they will have the farther satisfaction of knowing that the distresses of their widows and children will come under the cognizance not of hard and unfeeling parish officers, but of their professional brethren, who best know how to appreciate their losses and misfortunes.

2dly. Those who have little reason to dread the distress of the foregoing class, but who, notwithstanding, may, from various accidents, be thrown out of the course in which they are at present

present doing well. These partly from prudential, partly from philanthropic motives, ought to inscribe their names in the lists of this society.

3dly. Those, more especially, ought to belong to this Society, who have already attained such a rank in the profession, as to place them out of the reach of the misfortunes, which too often assail their more indigent brethren. Let those who have risen to fame and fortune by the practice of medicine, shew their gratitude for the emoluments that profession has conferred on them, by sparing a trifle from their superfluities towards the relief of the unhappy women and children, who have no husband to succour, no father to support them. It must give pleasure to every liberal-minded man to see his own profession respectable and respected. Let him then contribute to the means of adding to its respectability, by preserving from misery, from sorrow, and perhaps from vice, the widows and children of his professional brethren. Thus will he prove an honor to himself, and advantage to his friends, and a benefit to the community. Sibi ipsi honori, et amicis utilitati, et Reipublicæ emolumento esse possit.—*Cicero.*

Curzon-street, Nov. 7, 1801. S. M.

To the Editors of the Medical and Physical Journal.

Gentlemen,

A CASE has been related in a recent publication, in which a violent vomitting and purging, accompanied with very great prostration of strength, and succeeded by convulsions, was produced by the celebrated *Eau Medicinale d'Husson.* In the same work, also, we are informed, that at Paris its use is prohibited by authority, in consequence of its violent effects, and the sudden death of several persons, in no long time after they had been cured of gout by this medicine.

Several cases of a similar nature are said to have happened in this country, and the deaths of two well-known gentlemen, either quite suddenly, or after a very short illness, have been attributed to this medicine; but, I am informed, there is no good foundation for this report; it is, however, of such a nature, that it ought either to be confirmed or refuted by those who are acquainted with the facts. In your last number, p. 364, you have inserted a case on the authority of a very respectable medical practitioner, which sufficiently demonstrates the alarming and dangerous effects of this nostrum under some circumstances, and it ought to warn all persons not to be too free in recommending a medicine, the composition of which is unknown, but which evidently consists of the most powerful and active ingredients.

The

The question has been frequently agitated, what ought to be the conduct of the regular Physician, with regard to the exhibition of secret or *quack* medicines? Should he sanction their use occasionally, or always avow himself the enemy of concealed remedies, and trust solely to his own skill and to approved and established formulas? Perhaps this question can only be decided by individual practitioners according to circumstances; if a patient earnestly wishes to try the efficacy of some of those secret remedies which are daily puffed off in the newspapers, and other vehicles of intelligence, by interested, duped, or duping persons, it may be sometimes prudent for his regular medical friend to comply with his wishes; but I am very much inclined to believe that the physicians of the present day* too readily accede to their patients' whims in this respect, and that they do not sufficiently consult their own dignity and consequence on such occasions.

We are not however to wonder, that so many medical men have employed the Eau Medicinale d'Husson, in their practice, recommended as it was by good authority, and capable as it proved of producing evident and decisive relief in paroxysms of the gout; but it is to be regretted, that after so much experienec has been had of it, so little, to be depended upon, is known of its effects. Of its utility in some cases of gout, no doubt can be entertained, but there is abundant reason to believe that so potent a remedy so indiscriminately given, must frequently have produced effects unexpected and unpromising. These ought to be known, in order that its real virtues and efficacy may be duly understood. Is it possible that any precise and clear knowledge could be gained of the most proper method of employing the bark, mercury, opium, digitalis, and other powerful articles of the Materia Medica, if their ill effects had not been freely commented on, as well as their good qualities pointed out? And is it not desirable that the good and bad qualities of the Eau Medicinale (and I will add of all other *quack* medicines†) should likewise be made public?

I should hope, gentlemen, that you will be supplied with a large body of evidence upon the subject of the Eau Medicinale; to insert in your valuable pages, *all* the cases that might be trans-

---

* The principal Physicians of London, in the days of Doctor James, refused to prescribe his powder, because the composition of it was unknown to them; and whenever he was called in, they retired from their attendance. Yet Dr. James was a regular bred Physician, and a man of considerable learning and judgment.

† I believe nothing would tend more to discountenance quack medicines, than such an investigation of their good and ill effects, carefully conducted, and fairly laid before the public. By this means the very few useful nostrums would be known and properly employed, and the noxious and effete ones (by far the greater number) would be consigned to the neglect they deserve.

mitted

mitted to you of the good and ill effects of this mysterious nostrum, could not perhaps answer your purpose or be well received by your readers, but I think that the result of the experience of many practitioners might by your means be collected, and be candidly given to the public. That great advantages would be derived from such an exposition of facts is most certain, the Eau Medicinale would then soon settle at its proper level; it would be carefully and cautiously prescribed by practitioners of skill and judgment, who would probably improve its good qualities, and correct what was found to be noxious and prejudicial. At present it seems to be given in a most loose and irregular manner, without any consideration either of the patient's age, constitution, or manner of life; it is given indiscriminately either at the beginning, the middle, or the end of a fit of the gout; nobody seems to know what kind of operation is to be expected from it, or what regimen is to be observed during its use, yet every body acknowledges that its operation is sometimes alarmingly violent, and your pages shew that it is sometimes imminently dangerous.

I remain, &c.

Nov. 12, 1810. REPREHENSOR.

For the Medical and Physical Journal.

On Chorea.

THE symptoms of Chorea are so marked and evident, that any enumeration of them in this place would be superfluous. The best account of this singular disease will be found in Dr. Hamilton's observations on purgative medicines. He was the first writer who recommended trusting the cure entirely to cathartics. Sydenham indeed, who has also very accurately described this malady, administered purgatives, but he also prescribed bleeding, and paregorics. "Sanguinem ex ægri brachio ad uncias septem, plus vel minus, pro ratione ætatis, educi jubeo. Die sequente vel dimidiam partem, vel quiddam amplius, (pro ratione vel ætatis, vel etiam majoris minorisve corporis, ad subeundam catharsin aptitudine) potionis purgantis communis exhibeo." "Et vespere haustulum paregoricum propino.

"Potionem istam catharticam ad tres vices alternis diebus repetendam prescribo, et haustum paregoricum isdem noctibus. Postea sanguinem rursus extrahi curo, dein ut ad catharsin, uti prius, æger revertatur. Aque ita, alternatim sanguinem mitto, et subduco alvum, donec ægro vena ter quaterve fuerit incisa, et post singulas venæsectiones toties fuerit

fuerit purgatus, quoties vires ferre posse viderentur." It does not appear, however, that this practice proved very successful, and of late years practitioners have chiefly attempted to cure the complaint, by medicines of the stimulant and tonic class. The difficulty of effecting this desirable object is unquestionably, considerable, and sometimes the patient after going through all the changes of the Materia Medica, is given up to quacks or to nature.

I had, not long since, a pleasing opportunity of witnessing the good effects of Dr. Hamilton's mode of practice. A girl, aged ten years, had been severely affected with scarlet fever when three years old, soon after which, before she recovered from the consequent debility, she was attacked with chorea; at six years she had the measles, and was again seized with chorea. I understood the complaint continued several months, and at length subsided long after the medicines had been discontinued. I saw her during a fourth attack of chorea, and never witnessed more distorted gesticulation. Placing firm reliance on Dr. Hamilton's plan, I prescribed pulv. scammon. cum calomel. gr. xii. every other morning. After the first week, her mother thought the convulsive catchings of the limbs less severe, and in a fortnight she was at times altogether free from them; but she did not completely recover till she had persevered in the medicine six weeks. At first, the bowels were somewhat constipated, but after two or three doses of the medicine, which generally operated freely, nothing indicated the necessity of persevering in its use, except the continuance of the complaint.

In another case, of a girl about the same age, who was subjected to the complaint in consequence of being frightened by lightning, I pursued the purgative plan for a month, but without the least success, although the medicine operated strongly. I then prescribed small doses of Sulphas Zinci, and in the course of a week, a favourable change in the symptoms occurred, and she gradually recovered.

When a favourable occasion presents itself, I should be inclined to try the opiate friction, recommended by Mr. Ward in this Journal.

An interesting case, in which opiate friction was successful, is recorded in the *Bibliotheque Medicale* for February, 1809. "A child, aged nine years, of great sensibility and quickness, having received a slight reprimand from her father, was seized, in January 1808, with a general trembling, which was soon followed by involuntary motions of the hands and arms. Antispasmodics were employed, but the disease increasing in violence, M. Lullier, Doctor of Medicine, was called in on the 8th day. He found the arms, legs, and head of the child in

continual motion; the speech and deglutition much interrupted, and respiration very laborious, from the spasmodic action of the muscles subservient to those organs.

He added large doses of camphor to the anti-spasmodic medicine already prescribed, and sweetened the ptisan with syrup of piony. These remedies produced no effect, the disease in the course of a month increased to an alarming degree, notwithstanding the use of various powerful remedies, as baths, bleeding from the foot, zinc cinchona, valerian, glysters with assafœtida and laudanum. The body became emaciated, the pulse extremely feeble, and speech and deglutition almost impracticable. In this extremity, Dr. Lullier proposed a mixture of equal parts of laudanum, and Hoffman's anodyne liquor, to be rubbed on different parts of the body, and repeated every two hours. From the second friction, the symptoms abated in violence, and about the seventh or eighth day, tranquillity was completely restored to the system. The laudanum was diminished one-third, and the interval between the frictions progressively prolonged. At the end of nine days the patient was restored to her natural state, except that she continued feeble for several weeks; but has had no relapse during the space of ten months.

M. D.

Dr. Schenk on Croup.

CROUP is a disease so rapid in progress and fatal in termination, that it affords little time to consider the mode of treatment proper to be pursued; our practice must be prompt and decided. Yet we find practitioners vary considerably in opinion respecting the means of cure in this complaint. Some insist upon copious bleeding as the only chance of saving the patient, whilst others trust entirely to mercury.

Dr. Schenk, of Siegen, has stated in one of the German Journals an interesting account of his experience in this malady, of which, in the course of nine years, he has had occasion to treat twenty-two cases. The first was a child five years old, who had just recovered from the measles, but being exposed too soon to the air of an open window, was attacked with hoarseness, which on the following day increased, and was accompanied by a cough. Dr. Schenk considered it as a metastasis of the measles on the bronchiæ, applied a blister, and gave camphor and Aq. Ammon. Acet. The third day, the cough had a hollow sound, as if proceeding from a tun; the child complained of a stoppage in the throat which rendered respiration difficult; the voice was extremely hoarse; and at intervals he struggled with suffocation. The disease

was

was now apparent, but the remedies were applied too late, and the patient died on the evening of the third day.

This catastrophe left an indelible impression on the author's memory, and being called some month's afterwards to visit two children who were affected with what was termed a violent catarrh, on the third day of the attack he had no difficulty in undeceiving the parents respecting the nature of the malady which affected their children, who both died in the evening of that same day.

Upon opening the bodies, a lymphatic membrane was observed lining the bronchial vessels throughout their extent; in some parts, it adhered so closely, as scarcely to admit of being separated. This convinced the author that an opening into the trachea would not have preserved life.

The same winter (1800) he attended two girls of six and four years of age, in this complaint. He immediately pursued the practice of Lentin, which chiefly consists in the application of leeches, and the use of mercury, both externally and internally. On the second day the eldest was out of danger, and the youngest better. On the third, this also was considered to be safe. The mercury was discontinued, and a decoction of senega, with pectoral elixir, and syrup of gum ammoniac, was given. On the fourth day, the child was cheerful and going on well, though still occasionally coughing as in a common cold, without exciting any suspicion of danger. On the fifth day the complaint returned, and the child died on the sixth, although the use of mercury was resumed. Dr. Schenk attributed the relapse to this remedy being discontinued too soon. He was the more confirmed in this opinion, when, in the following spring, he succeeded in curing four children in the second day of the complaint by the internal and external administration of mercury, and in three of these cases, that was the only remedy employed, the leeches, so strongly recommended by Lentin, not being applied.

Since that period he has treated fourteen cases of Croup, and of these, eight recovered by the use of mercury alone; in the remaining six, the disease was too far advanced, Dr. Schenk not being called in till the third, or even fourth day.

NATIONAL VACCINE ESTABLISHMENT.

Ordered by the Board, that the following Description of the Vaccine Vesicle, and Instructions relative to Vaccination, which have been presented by the Director, be strictly observed by the Vaccinating Surgeons.

WHEN Vaccination succeeds, a small red spot is observable on the third day, the day the operation is performed being

reckoned the first. If the Spot is touched, an elevation is felt; and if examined with a magnifying glass the little tumor appears surrounded by a very slight efflorescence.

The Spot gradually enlarges; and between the third and sixth day, a circular Vesicle appears. The edge of the Vaccine Vesicle is elevated, the centre depressed. The colour is at first of a light pink, sometimes of a bluish tint; and changes by degrees to a pearl colour. The centre is somewhat darker than the other parts.

The Vesicle is hard to the touch.

In its internal structure, it is cellular; the cells being filled with transparent lymph.

The Vesicle commonly augments till the tenth or eleventh day.

In the early stages, there is usually round the base an inflamed ring; or this takes place on the seventh or eighth day; towards the ninth it spreads rapidly, and near the tenth forms an Areola of about an inch and a half in diameter.

This Areola is of the usual colour of inflamed skin; it is hard, and accompanied with some degree of tumefaction.

It continues out for a day or two, and then begins to fade; sometimes forming two or three concentric circles.

After the Areola is formed, the Vesicle begins to decline; the centre first turns brown, and the whole gradually changes into a hard, smooth scab, of a very dark mahogany colour.—This dry crust usually drops off about the end of the third week, leaving a permanent cicatrix.

Varieties in the Progress and Appearance of the Vaccine Vesicle, not preventing the Success of Vaccination.

The first appearance is seldom earlier, but often later than has been described. In some rare instances the Vesicle commences even a fortnight, or three weeks after Vaccination; but if the process is then regular, it is equally efficacious.

When the Vesicle is slightly ruptured before the sixth day, if it resume its proper form, and the process continue quite regular, success is not prevented: nor is it, when the crust of a regular Vesicle is rubbed off in the decline of the disease.

The Irregular and Imperfect Vesicle and Pustule, which are not to be depended upon.

In these deviations there is usually a premature itching, irritation, inflammation, vesication, or suppuration. Or the progress of the Vesicle is too rapid, its texture soft, its edge not well defined, its centre elevated, and the contents discoloured or purulent. Or instead of a proper Areola, a premature efflorescence of a dusky purple hue takes place, and the scab is of a light brown or amber colour.

The

The irregular Vesicle or Pustule is more liable to be broken, than the other, both from its more pointed form, and softer texture, and also from its being usually so irritable as to provoke scratching. When broken, or even without this happening, ulceration often ensues.

A Vesicle apparently regular at first, sometimes does not augment to the proper size, but dies away without compleating the regular process. This usually leaves no cicatrix, or one which is almost imperceptible.

When those, or any other considerable deviations from the regular course of the disease take place, no dependence can be placed upon the operation. In such cases Vaccination should be repeated.

Probable Causes of Irregular Vesicles and Pustules.

These accidents may be occasioned by matter or lymph being taken from an irregular Vesicle, or Pustule, at any period, or from a regular Vesicle, at too late a period; or by lymph, though originally pure, which has been injured by long keeping, by heat, or otherwise. Or they may be caused by performing the operation with rusty or unclean lancets, or in a rude manner, or by injuring the Vesicle at an early stage, and thereby exciting too much inflammation, or interrupting the regular progress of the disease. Herpetic eruptions, and other cutaneous affections, have also been supposed the cause of these irregularities; and occasionally to prevent the Vaccine lymph having any effect.

The Methods of taking Vaccine Lymph for Vaccination.

The lymph of a regular Vesicle is efficacious from the time it is secreted, till the Areola begins to spread. It may therefore commonly be taken till the ninth day; but not after the Areola is formed.

The lymph is to be taken by small superficial punctures made in the Vesicle, with the point of a lancet. Time should be allowed for the liquid to exude, which will form small pellucid drops. When requisite, a very slight pressure may be cautiously applied with the flat surface of the lancet. Great delicacy is requisite in this operation; for if the Vesicle is rudely treated, or too much opened, inflammation and ulceration may ensue.

Lymph intended to be used immediately, or in a few days, may be received on a lancet; but this is an improper instrument for preserving it longer; for the lymph soon rusts the lancet, and it is then liable to be inefficacious or injurious.—Quills and toothpicks succeed; but small bits of ivory shaped like the tooth of a comb, and properly pointed, are the most convenient instruments; and to render them more certain, they should be charged repeatedly.

In

In order to preserve lymph for a long period, the best method is by two bits of square glass. The lymph is to be received on the centre of one of them, by applying it to a punctured Vesicle. When fully charged and dry, it is to be covered with another bit of glass of the same size, and wrapped up in paper or in gold-beater's skin.

In which ever way the lymph is taken, it should be allowed to dry without heat, in the shade, and be kept in a dry and cool place. When inclosed in a letter, if great care is not taken it may be injured by the heat of the melted wax in sealing the packet.

The Mode of Vaccinating.

Liquid lymph is better than dry, because it seldomer fails, and the operation is more lightly and quickly performed. Therefore in every instance, where it is practicable, the patient from whom the lymph is to be taken should be present, and the lymph should be transferred from the one to the other.

Vaccination is generally performed in the arm near the insertion of the deltoid muscle; but in order to hide the scar, and in adults who are likely to use the arm much, it may be advisable to vaccinate the outside of the leg, a little above or below the knee.

The skin being stretched, a lancet charged with Vaccine lymph should be held with its flat surface to the skin; and the point insinuated slantingly through the cuticle till it touches the cutis. It should be retained there for a few seconds.

The lancet should be dipped in water and wiped after each operation, even when several successive inoculations are to be performed.

Dry lymph on glass may be moistened with a very little cold, or tepid water, on the point of a lancet, allowing it some time to dissolve, and blending it by a little friction with the lancet. It must not be much diluted, but of a thick consistence; it is to be inserted in the same manner as the recent fluid.

When quills, ivory lancets, or tooth-picks charged with dry lymph are used, the lymph should not be diluted, but a puncture having been first made with a common lancet, the point of the instrument is to be inserted, and held in the puncture half a minute or more, that the lymph may gradually dissolve and remain in the wound. If the part of the instrument which is charged, be afterwards wiped repeatedly upon the edges of the puncture, it will tend still farther to ensure success.

Vaccinated patients must be cautious not to wear tight sleeves,

nor

nor to injure the Vesicle by pressure, friction, or any other violence; lest considerable inflammation or ulceration should ensue.

One perfect Vaccine Vesicle is sufficient; but for various reasons, it is always prudent to make two or three punctures, especially when the danger of receiving the Small Pox is imminent, the lymph dry, or the patient's residence distant. Besides, greater security is obtained against a chance of failure from the derangement or destruction of one Vesicle by accidental injury, or by the taking of lymph for Vaccination. When two punctures are to be made in one limb, they should be at least two inches asunder, on account of the irritation they may occasion.

One Vesicle should be always permitted to go through its course without being punctured.

Lancets for Vaccination should be kept clean and bright.

Constitutional Symptoms.

Constitutional Symptoms sometimes occur at a very early period, but more commonly from the seventh to the eleventh day. These are drowsiness, restlessness, a chilliness succeeded by heat, thirst, head-ache, and other marks of febrile affection. Now and then sickness or vomiting takes place, especially in infants.

The Constitutional Symptoms are in general slight and transient.

In a great proportion of cases there is no perceptible indisposition; nevertheless, the person vaccinated is not the less secure from the future infection of the Small Pox, provided the progress of the Vesicle has been regular and complete.

Care should be taken not to confound the symptoms of other diseases with those produced by Vaccine Inoculation.

Medical Treatment.

In general no medicine is required in this mild affection; but if the symptoms happen to run a little higher than usual, the same remedies are to be applied, as if they proceeded from any other cause.

No preparatory medicines are necessary before vaccinating, and commonly no cathartics need be given afterwards.

Should the local inflammation exceed the usual bounds, which rarely happens, unless from tight sleeves, pressure or friction, it may soon be checked by the frequent application of compresses of linen dipped in water, in liquor Plumbi Acetatis dilutus, or in a solution of one drachm of Plumbi Superacetas in a pint of water. These are to be applied cold.

If the scab be rubbed off prematurely, and ulceration takes place, cooling and astringent applications may be used; such

as

as a drop of liquor Plumbi Acetatis which should be allowed to dry on the part, and then be covered with compresses dipped in water, or in either of the preparations of lead abovementioned, and frequently renewed.

When ulceration is deep or extensive, a poultice either of bread and milk, or of bread with any of the preparations of lead, may be applied, as the case seems to require. They must never be applied till they are nearly, or quite cold.

In such foul and obstinate sores as resist the foregoing applications, the Unguentum hydrargyri nitratis, mixed with an equal quantity of Unguentum Cetacei or other similar applications, may sometimes be resorted to with advantage. And at other times these sores may be healed by the Ceratum Plumbi Superacetatis, or the mildest applications.

The irregular Vesicles and Pustules are frequently followed by ulceration at an early period, which is to be treated in the same manner, as if it proceeded from the regular Vesicle.

When the patient has been previously exposed to the infection of Small Pox, this disease will be either superseded or not, according to the time which has elapsed before Vaccination.

Medical Gentlemen in all parts of the Empire may be supplied with Vaccine Lymph, without any expense, from the National Vaccine Establishment.

Applications for Lymph, Letters, and Communications respecting Vaccination, will meet with proper attention:—they should be addressed to Dr. Hervey, Register, Leicester Square; and when from a distance put under a cover, directed to the Right Hon. the Secretary of State for the Home Department.

Board Room, 21, *Leicester Square*, 1810.

Croonian Lecture. By William Hyde Woollaston, M. D. Sec. R. S.

(Phil. Trans. Part I. for 1810.)

THIS Lecture, read before the Royal Society, according to annual custom, and recently published in the Philosophical Transactions, is divided into three parts.

Part I. treats of the duration of *Voluntary Action.*

Part II. attempts to investigate the origin of *Sea-Sickness*, as arising from a simple mechanical cause deranging the circulation of the blood.

Part III. endeavours to explain the advantage derived from riding, and other modes of gestation, in assisting the health under various circumstances, in preference to every species of actual exertion.

Part I. *On the Duration of Muscular Action.*

THE necessity of occasional intermissions from a series of laborious exersions*, is within the experience of every one; the fatigue of continuing the effort of any one voluntary muscle without intermission even for a few minutes is also sufficiently known; but there is a third view of the duration of muscular action which appears to have escaped the notice of physiologists; for I believe it has not hitherto been observed that each effort, apparently single, consists in reality of a great number of contractions repeated at extremely short intervals: so short indeed that the intermediate relaxation cannot be visible, unless prolonged beyond the usual limits by a state of partial or general debility.

I have been led to infer the existence of these alternate motions from a sensation perceptible upon inserting the extremity of the finger into the ear. A sound is then perceived which resembles most nearly that of carriages at a great distance passing rapidly over a pavement.

---

* The fact of the muscular fibre becoming debilitated by long action, and then able to resist external impressions only in a lessened degree, we had occasion formerly to notice *(Med. and Phy. Jour. Vol. 24. p. 7)* as a circumstance involving much practical utility. Dr. Wollaston's Lecture, though not directly to this point, affords us the opportunity again to turn the attention of the actual practitioner to this principal, or condition of the muscular fibre. In the reduction of dislocations, in the passing sphincters, in overcoming the resistance of muscles on many other occasions, a knowledge of this fact may often afford the means of relief, and sometimes save the reputation of the practitioner. A striking instance of this is noticed in the place referred to, in the first part of this note.

The rapidity of the motion varies according to the degree of force with which the finger is retained in its place. The sound thus perceived is not at all dependent on the degree of pressure upon the tympanum; for, on the contrary, the vibratory sound is most distinct when that pressure is slight, if the finger be at the same time rendered rigid by the forcible action of antagonist muscles; and when the ear is stopped with great force without the presence of muscular action, no such sound is produced. For instance, if the head be rested upon the hand in such a position, as to press with its whole weight upon the ball of the thumb applied to the ear, no noise is perceived, unless the extremity of the thumb be at the same time pressed against the head, or unless the action of some other muscles be communicated to the ear, by any inadvertence in the method of conducting the experiment.

When I endeavoured to estimate the frequency of these vibratory alternations, they appeared to be in general between 20 and 30 in a second; but it is possible that the method I employed may be found defective, and it is to be hoped that my estimate may be corrected, by some means better adapted to the determination of intervals that cannot actually be measured.

It was by imitation alone that I was enabled to judge of their frequency. For this purpose I contrived to render the vibration itself, and the imitative sound, both audible by the same ear.

While my ear rested on the ball of my thumb, my elbow was supported by a board lying horizontally, in which were cut a number of notches of equal size, and about $\frac{1}{8}$ of an inch asunder. Then, by rubbing a pencil or other round piece of wood with a regular motion along the notches, I could imitate pretty correctly the tremor produced by the pressure of my thumb against my head, and by marks to indicate the number of notches passed over in 5 or 10 seconds, observed by my watch, I found repeated observations agree with each other as nearly as could be expected; for I could not depend upon exerting the same degree of force in different trials.

That I might not be deceived by the resemblance of tremors, which coincided only at alternate beats, and therefore might be considered as octaves in music to each other, I sometimes employed notches at greater and sometimes at less distances from each other, but the result was nevertheless the same; and in order to avoid any error that might be caused by some accidental quality of the sound arising from the length of the muscle employed, or length of the bones concerned in conveying the imitative sound to my ear, I made

the following variation of the experiment. My ear was stopped by a cushion pressed upon by the end of a notched stick that rested on my foot, and thus conveyed the vibration from the muscles of my leg to the ear, along with the tremor produced by friction upon the notches; and still the results were nearly the same; varying in frequency between 20 and 30 in a second, according to the degree of force exerted in the experiment.*

As a further proof that I was not much deceived in my judgment of the frequency of these vibrations, I requested two or three of my friends to repeat the same experiment for me, and our agreement was such as to confirm me in the opinion, that there could be no very considerable error in the estimate.

The greatest frequency that I think I have observed, was about 35 or 36 in a second, and the least was as low as 14 or 15; but in attempting to lessen the number of vibrations, there appears to be a degree of unsteadiness which prevents any accurate measurement of the real number.

It is very probable, that in cases of great debility the number may be even considerably less, and may be the reason of that visible unsteadiness, which is known to occur in persons enfeebled by age, or much reduced by disease.

Possibly the foregoing observation may not be altogether new to some members of this Society, as it is now about 17 or 18 years since it first occurred to me, and I was then accustomed occasionally to mention it in conversation with my friends; but I am not aware that any other person has made the same remark respecting the vibratory nature of muscular action, although I find that Grimaldi had observed the sound that occurs upon stopping the ears, but ascribed it, according to the notions that prevailed in his time, to the hurried motions of the animal spirits.†

---

* The resemblance of the muscular vibrations to the sound of carriages at a distance, I apprehend to arise not so much from the quality of the sound as from an agreement in frequency with an average of the tremors usually produced by the number of stones in the regular pavement of London, passed over by carriages moving quickly.

If the number of vibrations be supposed 24 in a second, and the breadth of each stone be about 6 inches, the rate of a carriage thus estimated would be about 8 miles an hour, which agrees with the truth as nearly as the assumptions on which the estimate is founded.

† Vera itaque ratio experimenti prædicti est, quia in digito et brachio totoque corpore continuato fiunt multi motus ac tremores, ob spirituum agitationem huc illuc perpetuo accurrentium.

GRIMALDI, Physicomathesis de Lumine, p. 383.

Part II. *On Sea-Sickness.*

The cause of sea-sickness has not hitherto been fully explained; and although the explanation which I am about to propose, may not appear altogether satisfactory to persons who, when at sea, are also rendered giddy by the incessant motion of the waves, and are consequently liable to consider as cause and effect phænomena which in their minds are constantly associated, yet the observation on which it is founded may deserve to be recorded, on account of the degree of relief that may be obtained in that most distressing affection.

After I had been harassed by sea-sickness during a short voyage for some days, and had in vain attempted to account for the difference between the inexperienced passenger, and those around him more accustomed to the motion of the sea, I imperceptibly acquired some power of resisting its effects, and had the good fortune to observe a peculiarity in my mode of respiration, evidently connected with the motion of the vessel, but of which, in my then enfeebled state, I was unable to investigate either the cause or consequence. In waking from a state of very disturbed sleep, I found that my respirations were not taken with the accustomed uniformity, but were interrupted by irregular pauses, with an appearance of watching for some favourable opportunity for making the succeeding effort; and it seemed as if the act of inspiration were in some manner to be guided by the tendency of the vessel to pitch with an uneasy motion.

The mode by which I afterwards conceived that this action could primarily affect the system, was by its influence on the motion of the blood; for, at the same instant that the chest is dilated for the reception of air, its vessels become also more open to the reception of the blood, so that the return of blood from the head is more free than at any other period of a complete respiration. On the contrary, by the act of expelling air from the lungs, the ingress of blood is so far obstructed, that, when the surface of the brain is exposed by the trepan, a successive turgescence and subsidence of the brain is seen, in alternate motion with the different states of the chest. It is probably from this cause that, in severe head-aches, a degree of temporary relief is obtained by occasional complete inspirations.

In sea-sickness also the act of inspiration will have some tendency to relieve, if regulated so as to counteract any temporary pressure of blood upon the brain; but the cause of such pressure requires first to be investigated.

All those who have ever suffered from sea-sickness (without

out being giddy) will agree that the principal uneasiness is felt during the subsidence of the vessel by the sinking of the wave on which it rests. It is during this subsidence that the blood has a tendency to press with unusual force upon the brain.

If a person be supposed standing erect upon deck, it is evident that the brain, which is uppermost, then sustains no pressure from the mere weight of the blood, and that the vessels of the feet and lower parts of the body must contract, with a force sufficient to resist the pressure of a column of blood, of between five and six feet from the head downwards.

If the deck were, by any means, suddenly and entirely removed, the blood would be no longer supported by its vessels; but both would fall together with the same velocity by the free action of gravity; and the same contraction of the vessels which before supported the weight of the blood would now occasion it to press upon the brain, with a force proportional to its former altitude.

In the same manner, and for the same reason, during a more gradual subsidence of the deck, and partial removal of support, there must be a partial diminution of the pressure of the blood upon its vessels, and consequently, a partial re-action upon the brain, which would be directly counteracted by a full inspiration.

The consequence of external motion upon the blood will be best elucidated by what may be seen to occur in a column of mercury similarly circumstanced.

A barometer, when carried out to sea in a calm, rests at the same height at which it would stand on shore; but, when the ship falls by subsidence of the wave, the mercury is seen apparently to rise in the tube that contains it, because a portion of its gravity is then employed in occasioning its descent along with the vessel; and accordingly, if it were confined in a tube closed at bottom, it would no longer press with its whole weight upon the lower end. In the same manner, and for the same reason, the blood no longer presses downwards with its whole weight, and will be driven upwards, by the elasticity which before was merely sufficient to support it.

The sickness occasioned by swinging is evidently from the same causes as sea-sickness, and that direction of the motion which occasions the most piercing sensation of uneasiness, is conformable to the explanation above given.

It is in descending forwards that this sensation is perceived; for then the blood has the greatest tendency to move from the feet towards the head, since the line joining them is in the direction of the motion. But when, in the descent backwards, the motion is transverse to the line of the body, it

it occasions little comparative inconvenience, because the tendency to propel the blood towards the head is then inconsiderable.

The regularity of the motion in swinging, afforded me an apparently favourable opportunity for trying the effect of inspiration; but although the advantage was manifest, I must confess, it did not fully equal the expectations I had formed from my experience at sea. It is possible, that the suddenness of the descent may in this case be too great to be fully counteracted by such means; but I am inclined to think that the contents of the intestines are also affected by the same cause as the blood: and if these have any direct disposition to regurgitate, this consequence will be in no degree counteracted by the process of respiration.

A friend of mine informed me that he had endeavoured to counteract this mechanical effect upon the stomach, and had experienced immediate relief from a slight degree of seasickness, by lying down upon the deck with his head towards the stem of the vessel; by means of which, upon pitching he was in the attitude of a person descending backwards in a swing.

Whether the stomach be or be not thus primarily affected, or only by sympathy with the brain, the sensation of sinking is in all cases referred directly to the stomach, which is seized with such instantaneous retching, that no person, who has not been so situated, can form a just conception of it.*

In thus referring the sensations of sea-sickness in so great a degree, to the agency of mere mechanical pressure, I feel confirmed by considering the consequence of an opposite motion, which by too quickly withdrawing blood from the head, occasions a tendency to faint, or that approach to fainting, which amounts to a momentary giddiness with diminution of

---

* There is one occasion upon which a slighter sensation of this kind is perceived, and it appears to indicate the direction of the motion from which it arises, to be downwards. "In a country subject to frequent returns of earthquakes" it is said* that "a few minutes before any shock came, many people could foretel it by an alteration in their stomachs; an effect which" (it is added) "always accompanies the wave-like motion of earthquakes, when it is so weak as to be uncertainly distinguishable."

(Mitchell, Phil. Trans. Vol. LI. 610.)

It seems that the vapours to which these tremendous concussions are owing, immense in quantity, and of prodigious force, being for a time confined on all sides, elevate the surface of a country to a vast extent until they either find vent, or meet with some partial cause of condensation, and hence the alternate heaving and subsidence of the ground, will produce much the same effects as the rising and falling of the swell at sea.

* Phil. Trans. Vol. XLII. p. 41.

mucular

muscular power. At a time when I was much fatigued by exercise, I had occasion to run to some distance, and seat myself under a low wall for shelter from a very heavy shower. In rising suddenly from this position I was attacked with such a degree of giddiness, that I involuntarily dropped into my former posture, and was instantaneously relieved, by return of blood to the head, from every sensation of uneasiness.

Since that time, the same affection has frequently occurred to me in slighter degrees, and I have observed, that it has always been under similar circumstances of rising suddenly from an inclined position, after some degree of previous fatigue. Sinking down again immediately removes the giddiness; and then, by rising a second time more gradually, the same sensation is avoided.

Part III. *On the salutary Effects of Riding, and other Modes of Gestation.**

In the preceding instances of disturbing the circulation of the blood, by external motion, the effect is disagreeable, and proportionally prejudicial. There may indeed be cases of disorder, in which it will be salutary, but these are probably less frequent than is generally supposed.

In the observations which follow, general opinion will concur with me, on the benefit derived from external, or passive motion, and I hope, that in ascribing its good effects to their true cause, I shall enable others to make a valuable distinction, which has not yet been preserved with due care, between one motion which is salutary, and another which is very frequently pernicious. For, although the term *gestation* is employed by medical writers, as a general term comprehending riding on horseback, or in a carriage, and although the merits of such motions, especially the former, were clearly noticed, and perhaps even over-rated, by the discernment of Sydenham, I believe that no explanation has yet been given, of the peculiar advantages of external motion, and am persuaded, that the benefits to be derived from carriage exercise are by no means in so high estimation as they ought to be.

---

* Our readers will, perhaps, recollect an Inaugural Dissertation, *de Typhi Remediis*, in 1807 by Dr. Baldwin Wake, in which the beneficial effects of *gestation*, in fever, are particularly detailed. Many strong facts are there given in support of *gestation* as a remedial process in certain states of fever. We then thought, as we now do, not only from the relation of Dr. Wake, but from some facts that have come particularly under our notice, that gestation may be used with much advantage, in some morbid states; but that further observations are required to fully ascertain the causes and periods of disease suited to it, with a precision that may enable practitioners to employ it without hazard, and with a reasonable prospect of success.

Under

Under the common term *exercise*, active exertion has too frequently been confounded with passive gestation, and fatiguing efforts have consequently been substituted for motions that are agreeable, and even directly invigorating, when duly adapted to the strength of the invalid, and the peculiar nature of his indisposition.

The explanation which I am about to offer of the effects of external motion upon the circulation of the blood, is founded upon a part of the structure observable in the venous system, the mechanical tendency of which cannot be doubted. The valves which are every where dispersed through those vessels, allow free passage to the blood, when propelled forward, by any motion that assists its progress; but they oppose an immediate obstacle to such as have a contrary tendency. The circulation is consequently helped forward by every degree of gentle agitation. The heart is supported in any laborious effort that may have become necessary, by some obstacle to its exertions; it is assisted in the great work of restoring a system, which has recently struggled with some violent attack; or it is allowed, as it were, to rest from a labour, to which it is unequal, when the powers of life are nearly exhausted by any lingering disorder.

In the relief thus afforded to an organ so essential to life, all other vital functions must necessarily participate; and the various offices of secretion, and assimilation, by whatever means they are performed, will not fail to be promoted during such comparative repose from laborious exertion.

Even the powers of the mind itself, though apparently, least likely to be influenced by mere mechanical means, are manifestly, and in many persons, most immediately affected, by these kinds of motion.

It is not only in cases of absolute deficiency of power to carry on the customary circulation, that the beneficial effects of gestation are felt, but equally so, when comparative inability arises from redundancy of matter to be propelled. When from fulness of blood, the circulation is obstructed, the whole system labours under a feeling of hurry and agitation, with that sensibility to sudden impressions, which is usually termed nervousness. The mind becomes incapable of any deliberate consideration, and is impressed with horrors that have no foundation, but in a distempered imagination.

It is in moderate degrees of this species of affection, that the advantages of carriage exercise are most sensibly felt. The composed serenity of mind, that succeeds to the previous alarm, is described by some persons with a degree of satisfaction, that evinces the decided influence of the remedy. With this steadier tone of mind, returns its full power of cool reflection;

reflection; and if the imagination becomes more alive than usual, its activity is now employed in conceiving scenes that are amusing, and agreeable.

As an instance of direct relief to a circulation, labouring from mere fulness of blood, I may adduce that of a person, whose friends, as well as himself, were apprehensive, from the violent and visible throbbing of his heart, of the existence of some organic mischief, and were in some measure alarmed for the consequences.

He was persuaded, and not reluctantly, to go without delay, for medical advice, and was accordingly conveyed in a carriage to the house of some physician of eminence, but did not succeed in finding him at home. As the symptoms did not appear to admit of delay, and were at least not aggravated by the motion, it was hoped that the wished-for advice might be obtained at a part of the town, which happened to be at some distance. But the second attempt proved as fruitless as the former, and a third was made with the same event. Since the throbbing had by that time considerably abated, he was contented to postpone any further efforts to the following day, and directed the carriage homewards. By the time that he returned to his friends, he found, that the motion of travelling over several miles of pavement, had apparently removed the complaint. The pulsation of the heart and arteries had subsided to their natural standard, and he congratulated himself, that his search of a remedy had not been ineffectual, although he had been disappointed as to the source from which he thought he had most reason to expect relief.

If vigour can in any instance be directly given, a man may certainly be said to receive it in the most direct mode, when the important service of impelling forward the circulation of his blood is performed for him by external means. The main spring, or first mover of the system, is thereby, as it were, wound up; and although the several subordinate operations, of so complicated a machine, cannot be regulated in detail, by mere external agency, they must each be performed with greater freedom, in consequence of this general supply of power.

In almost every treatise on the subject of chronical diseases, are to be found numerous instances of the benefit, produced by the several modes of gestation, which have been most generally adopted; as riding on horseback, in carriages, sea-voyages, and swinging. And in many cases, which might be adduced, it has appeared too clear, to admit of a doubt, that the cure of the patient has been owing *solely* to the external agitation of his body, which must be allowed, at least, to have had the effect above explained: that of relieving the

 heart

heart and arteries from a great part of their exertion in propelling the blood, and *may* therefore have contributed to the cure, by that means only.

The different modes above mentioned, are adapted from their nature to different degrees of bodily strength, and if there are cases in which, that which appears most eligible, may not suit the situation, or circumstances of the patient, it can not be difficult to contrive other means of giving motion, so as least to incommode, and yet to give the greatest relief. A very gentle and long continued, or even incessant motion, may suit some cases better than any more violent and occasional agitation; and in this way, probably, it is, that sea voyagss have sometimes been attended with remarkable advantage.

CRITICAL ANALYSIS

OF

RECENT PUBLICATIONS

IN THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY,

An Address delivered to the Lincolnshire Benevolent Medical Society at their anniversary Meeting in 1809. *Containing an account of the proceedings lately adopted to improve Medical Science, and an Exposition of the intended Act for regulating Medical Education and Practice. To which is added an Appendix, comprising the Acts of Henry VIII. and the Correspondenec had with the public bodies; together with the legal opinion of an eminent Counsel on the subject of Medical regulation, &c.* By EDWARD HARRISON, M. D. F. R. A. S. Ed. &c. &c. 8vo. Bickerstaff. London, 1810.

UNDISMAYED by the want of success which has hitherto attended his exertions, Dr. Harrison, though in some respects he has abandoned his original plan of extending the term of education, continues to stand forth the champion of Medical Reform. The volume before us contains a full account of the proceedings which have yet occurred on the subject. The transactions of the meetings at which Sir Joseph Banks presided have already been made public, and in a late Number

ber of this Journal, Dr. Harrison's Memorial was inserted. We shall therefore, at present, merely state the substance of the Bill intended to be laid before the ensuing Session of Parliament, and offer some observations upon the general question.——Every person who shall practise for gain, in Great Britain or Ireland, as a physician, surgeon, midwife, apothecary, or veterinary practitioner; or who shall sell medicines or drugs, or chemical preparations by retail as an apothecary, compounder, or vender of medicines or drugs, shall cause to be entered in a register, his name, place of abode, and the capacity in which he practises, or vends medicines, drugs, &c.—Upon changing his place of abode, or the capacity in which he practises, he shall be required to make a new entry thereof, within the space of one month after such change. At the time of making the entry, the person is to receive a certificate of the capacity in which he is registered to practise, &c. Physicians, Surgeons, Midwives, Apothecaries, &c. &c. are required, under a penalty, annually to take out a certificate, that they have been duly registered.—They are also obliged, under a penalty, to put upon, or over their doors, the capacities in which they practise. The qualifications for enabling them to practise according to this Bill, are as follow :—a Physician must have taken the degree of a DOCTOR or BACHELOR OF PHYSIC, in some University, and must have obtained "a diploma or authority to practise as a Physician, from the Royal College of Physicians of London, if he reside in England, or Wales; from the Royal College of Physicians of Dublin, if he reside in Ireland; and from the Royal College of Physicians of Edinburgh, if he reside in any other part of Scotland than in the counties of Lanark, Renfrew, Dumbarton, and Air; and if he reside in any of these counties, then from the Faculty of Physicians and Surgeons of Glasgow. A Surgeon must obtain a diploma or authority to practise, from the Royal College of Surgeons of London, if he reside in England or Wales; if in Ireland, from the Royal College of Surgeons of Dublin; if in Scotland, from the Royal College of Surgeons of Edinburgh, except he reside in the counties of Lanark, Renfrew, &c. then from the Faculty of Physicians and Surgeons of Glasgow.

No person acting as apothecary, vender of medicines, &c. shall be entitled to be registered to act as such, until he shall have served an apprenticeship, by regular indentures, to a Physician or Surgeon, who dispenses medicines, or has the care of an hospital or dispensary; or to an Apothecary; nor until he shall have been examined by, and shall have obtained a certificate from the Company of Apothecaries in London, or Dublin, or in Edinburgh, from a Medical Board to be esta-

 blished

blished by the Commissioners appointed to carry this Act into execution, and if he reside more than seven miles from such Company or Board, then either from the aforesaid Company or Board, or from Medical persons appointed by the said Commissioners for that purpose.

No person shall be entitled to be registered to act as a Man-midwife, for gain, unless he be a Physician, Surgeon, or Apothecary, and have obtained a Certificate from a Board of Midwifery Practitioners, to be appointed by the said Commissioners. Female Midwifes shall not be registered to act as such, until they have been examined and licensed by a Board of Midwifery Practitioners. Farriers and Veterinary Practitioners are to be examined, and to obtain authority to practise as such, from some person appointed by the said Commissioners, before they can be entitled to be registered to act in their professional capacity.

Bone-setters will be allowed to act and practise under Licences from Justices at Quarter Sessions, who shall have the power of withdrawing any such Licence whenever they shall think proper.

"Every person who shall not have entered into practice before the passing of this Act, as a Physician, Surgeon, Man-midwife, Apothecary, Compounder, or Vender of Drugs by retail, shall pay to the Registrar, when his name is first entered upon the register, the sum of twenty pounds, to be applied to carry into execution the purposes of this Act."

The Bill does not extend to prevent persons from selling drugs or medicines subject to a stamp duty.

The remainder of the Bill relates to the appointment of Commissioners, the regulation of their duty, and the application of the monies received.

From the whole of his conduct in this affair, we are disposed to believe, that Dr. Harrison has acted from good motives, and is convinced of the utility and practicability of the object which he has in view. We confess, however, that we observed, with compassion, his former attempts to induce the ROYAL COLLEGE of PHYSICIANS to co-operate with his party, because we well knew, that the attempt would be abortive; it is the interest of the College, according to its present constitution, to tolerate an inferior description of Practitioners, in order to secure an ascendancy for its own fellows. Dr. Harrison satisfactorily proved, what no intelligent and impartial man will deny, that great abuses prevail in our profession throughout every part of the empire; in Lincolnshire, and we doubt not the same may be the case in many other counties, he ascertained that empirical pretenders exceeded the regular Faculty, in the proportion of nine to one, and that many per-

sons

sons practised as Physicians and Surgeons, who had no title or claim to those honourable appellations. Sir Lucas Pepys, the President of the College, admitted that these abuses existed, and that it was expedient that they should be removed. The ROYAL COLLEGE even roused itself from its long slumber, published advertisements in the newspapers, sent addresses to the Quarter Sessions, and circulated lists of its members, "in order that the names of all those may be known, who, having been examined by the College according to law, have been deemed competent to practise as Physicians."—These addresses produced about as much effect on the honest justices, as the bulls of the Pope upon Dissenters; we did not hear of a single delinquent being punished or interdicted. In fact, we believe that the College discovered that its power did not extend ten miles from Warwick-lane, and was unwilling to expose its limited authority by promoting an inquiry into abuses which it could not prevent.

Finding that he could not obtain assistance from any of the incorporated Bodies of Medicine, and Surgery, in London, or Edinburgh; Dr. Harrison projected the Bill, the substance of which we have just stated. We do not, however, anticipate a favourable result from such an application to Parliament, and much doubt, that were the plan carried into execution, its effects would be salutary. The COLLEGE OF PHYSICIANS was instituted by Royal Authority, and from the nature of its constitution is intimately connected with our two English Universities, and consequently may be regarded as forming part of the aristocratic establishment of the country: any attempt at reform, therefore, not sanctioned by the College itself, must be hopeless, whilst these institutions continue to be upheld by government.

Can we even for a moment suppose that our legislators deem the health of the people of any importance, when a large revenue is derived from the distillation of ardent spirits, and the sale of empirical nostrums, which we apprehend are infinitely more destructive than the combined efforts of all the persons practising medicine without being duly qualified, in the three kingdoms?

Dr. Beddoes, in his letter to Sir Joseph Banks, observes, The association must well know, that perjury is constantly kept up by the means taken to recommend quack medicines; that in consequence of money expended in their purchase, families above the poorest class are frequently deprived of the necessaries of life: that there are instances where people have sold the bed from under them, (the rage for quack-medicines, in some familiar instances, being just like the habit of dram-drinking,) and that the resort to these preparations is far from being only the natural catching at a straw, in him who feels himself drowning. The prostitute

stitute is not content to wait at home in readiness to satiate already excited appetites, but roams abroad to practise all the arts of provocation. Neither is the quack content with the spontaneous yearnings of credulity; his lures are spread in all our streets. The office of every country newspaper is an office for his medicines, and often for nothing else. From the sale, the printer procures advertisements, and pays himself. Every country bookseller almost is stimulated by an enormous commission to pass them off. I think, therefore, that a scheme for a reform of medicine, without the abolition of quack-medicines, is almost as hopeless, as one for making the rattle-snake harmless, leaving the venom fangs in his jaws; nor should I be surprized, if such a scheme pass, to hear of a grand dinner among the quacks, and each reformer being toasted in a bumper."

These real grievances, grievances at which our nature shudders, are suffered to remain; whilst the proposed Bill is calculated in its operation to subject a respectable, and in general, a well-educated body of men to very irksome restrictions. Is it not enough that after having taken out a diploma in a regular way, a Physician again submits to be examined by the Censors of the College, and pays a large sum, of the application of which he is kept wholly ignorant; but that he must, after all this, be registered, pay twenty guineas, and annually take out a certificate; in short be subjected to the same regulations as are to be imposed on the most inferior practitioners of the art! It is true that men of ability and address, without the advantages of scholastic education, or of College discipline, will obtain the confidence and the patronage of the public in an eminent degree, but we cannot altogether see the justice of attempting to deprive such men of doing good to others, and benefiting themselves, because some of them may do mischief. If a Physician with the advantages of a liberal education, and a regular diploma, cannot make his superiority be acknowledged, we must confess that we do not see the propriety of protecting him, and imposing his dulness on the public, by restrictions which would exclude men of talent, who may know how to cure a disease, though they cannot construe Hippocrates.

We presume Dr. Harrison has perused an ancient treatise, entitled "A Corner-stone laid towards the building of a New College, (that is to say, a new body of Physicians), &c." If so, he will probably recollect the following passage. "'It seems to be one of the most unreasonable things in the world, and nothing can be more destructive to the liberty of the subject, or make a man more miserable, than that if he be sick, he should not with freedom use what Physician he believes can best cure him, but he must be limited to an accepting of such

such or such a one, of such a company, or else can have none that he fancies, but the man shall be molested, perhaps undone, for doing the sick service; and all under a supposal of avoiding thereby the use of bad physick among the people."

The emoluments of a medical man must depend on the opinion of the public. If illiterate and uneducated practitioners bear down those of an opposite description, we must conclude that the public is very ignorant, and that the present race of Physicians is too learned for them, and must consequently seek some other means of support, or repair to other countries where medical learning is required. But we have no hesitation in asserting that this is not the case; the times are unfavourable to mediocrity in medical attainments; chicane and intrigue may impose for a time, but soon give place to real merit. If many men of indisputable worth never acquire much practice, such persons will generally be found pursuing other objects than those of their profession, or they labour under disadvantages which their genius cannot overcome.

The same objection to the Bill will hold with regard to Surgeons: whenever the field of practice is extensive we may depend on finding adequate Surgeons; if people prefer dwelling in villages and obscure situations, they must be content with what chirurgical assistance they can obtain; no College, no Parliamentary edict, will ensure the lord of a solitary mansion the aid of a skilful Surgeon, unless the neighbourhood be populous. As to Apothecaries, we believe, that throughout the kingdom, their education, skill, and good conduct, is quite equal to the drudgery which they endure, and the moderate stipend they receive. Would men of university education, and with scientific acquirements submit to the daily labour of a country apothecary? Dr. Harrison has, to be sure, adduced some lamentable instances of the evils occasioned by *soi-disant* medical practitioners, but from the very circumstance of these cases being shocking to humanity, we contend that the danger of their increasing or being tolerated is diminished. The Bill, if enacted, would deprive many districts of regular practitioners, because their emoluments would not be adequate to the irksome and expensive regulations imposed on them. In fine, we have nothing to praise in the work, but the intention of the author, who we regret has bestowed so much time and attention upon this stubborn subject. It appears to us that he has attempted to lop some mishapen branches of an old tree, whilst he feared to apply the axe to the decayed trunk. One of his suggestions indeed merits

merits consideration, and we hope, whatever be the fate of his Bill, that the scheme may obtain the consideration which it deserves. It is a notorious and distressing fact that in the first city of the world, the seat of a Royal College of Physicians, there should be no complete and liberal system of medical instruction. Our hospitals afford the most extensive scope for practical observation, and scientific investigation; our lecturers are well versed in their art, but disturbed by the engagements of private practice, they have little leisure for systematic arrangement, or very profound attainments, whilst teachers of less eminence, cannot command a number of pupils sufficient to remunerate them for their toil. The knowledge of medicine cannot be obtained at Oxford and Cambridge; and in the Edinburgh school, the confined opportunities of acquiring practical information, are hardly compensated by the attention which is bestowed on theoretical and erudite disquisition. Dr. Harrison then proposes the establishment of a Medical School in London, in which he was preceded by Dr. Beddoes,* with whose acute and sensible remarks on the subject, we shall conclude this article.

I trust, (he observes) if it ever come to law-making, that the objection will be radically removed, by endowing London, at once, with the privilege enjoyed by every great metropolis in Europe besides, and particularly suited to a great metropolis. An attempt at improvement, short of this, though it may not leave British medicine as ineffective as the pamphlet of Dr. Harrison found it, will leave it much more ineffective than the means of instruction allow, and the public good requires. Why, in the name of common sense, should not London be authorized to call candidates in our faculty to the bed-side, as it does those in another to the bar? Neither English university would, I dare say, view

---

* Dr. Beddoes might have obtained the first suggestion of this plan from the "Corner-Stone" before quoted. The author of that rare tract, Dr. Huyberts, observes, "If the whole body of Physicians here in this city, be really the Physicians of London, why may they not, being part of the city, be taken hereafter under the city government? Be obliged to take apprentices, such young men as have taken degrees in other arts at some University; who, when they have served their time at work under a city Physician, may then be made a free Practiser of *London.* Such a populous city is the only place (being a theatre of all diseases) wherein to breed up men Physicians indeed; such as may practise with real knowledge; not fill the world with cobwebs of idle speculations and notions, as men of the old way of education are wont to do; and which may furnish his Majesty's armies and fleets royal with Physicians, as the Society of Chirurgie do with Chirurgians; and be content to submit to a law, that if they *run away from the city in the time of plague*†, or depart without special licence of authority, to forfeit their freedom of practice therein any more."

† It seems that upon the plague breaking out in London, the city was abandoned by most of the fellows of the college, Dr. Wharton, and three or four more only remaining.

the

the measure with jealousy. The members, and the whole public must perceive that London is the spot in Great Britain, and probably in the whole world, where medicine may be taught, as well as cultivated, to most advantage. Nor would it be easy to estimate the number of persons, whom our government has suffered to linger in misery, or to die in the flower of their days, simply from having so long neglected to found a complete Medical Seminary there. The claim is on the part of human misery, not of national pride. By the force of its unrivalled opportunity alone, with but few teachers, either celebrated, or deserving celebrity, though they now seem to have grown as thick as haberdashers, London has, perhaps, more than equalled the most celebrated Seminaries, and it would, I think, amount to a sort of treason against the common-weal, if they should remain without being seconded by the whole public power, after the state of medicine comes to be a matter of legislative deliberation. In the course of many years, I not only never heard a specious objection, but generally found, when the leading ideas were propounded, that every hearer followed them up to the same conclusion.

But let us not, at least not wilfully, take a station below Paris. Let our regulations aim at still greater maturity in those whom we shall send forth to practise, and teach the healing art *ubique gentium.* What would it avail to increase the breed of Practitioners, akin to those coffee-house politicians of ours, to whom the leading paragraph of the Morning Post stands in the place of history, and political economy; practitioners, all absorbed in the last curious case at Guy's, or the last curious opinion from St. Bartholomew's; and not much more deeply skilled in the disorders of the individual, than the news-mongers are in those of the body politic.

Every well wisher to medicine, and to mankind, would desire to see Edinburgh maintain or recover what she ever had of real excellence.— The contest would be generous if fairly carried on, and the competitors be allowed the fullest exercise of their faculties. But let not London have her hands tied behind her, that the sons of Edinburgh may have the delight of beholding her superiority, or at least escape being mortified by her manifest inferiority."

Description of an affection on the Tibia induced by Fever, with Observations on the Treatment of this Complaint. By THOMAS WHATÉLEY, Member of the Royal College of Surgeons in London. 8vo. London. 1810. pp. 59. Coloured plate. Callow.

THE complaint which this essay professes to describe, is a disease of the Tibia. It is pointed out by one or more small openings in the integuments lying upon the surface of this bone, through which an instrument may be passed into its cavity. A proper examination with the probe will detect one, or sometimes several loose pieces of bone lying in this

cavity; and which being larger than the external opening, are necessarily confined within the Tibia, and [illegible] dead matter, certainly and invariably prevent the healing of the ulcer.

The curative process is simple and effectual. The external opening must be enlarged to a dimension that admits of the exfoliated portion of bone being removed, and then with easy dressings, a proper attention being given to the general health, and care taken to avoid the causes of irritation, the ulcer soon heals.

The only question seems to be how this opening into the cavity of the Tibia is to be enlarged, for the purpose of extricating the portion of dead bone. Most surgeons would use the trephine; Mr. Whateley, however, prefers caustic. (*Kali purum.*)

This disease, which is undoubtedly an internal exfoliation of the Tibia, is, perhaps, generally a *sequela* of fever; or, is some way connected with, or excited by, a preceding febrile affection.

"Having observed," says Mr. Whately, "that in almost all the cases of this kind, which I have had in hand, the complaint had been preceded by fever, I have been led to consider the dissase in question as a febrile affection of the part. I should inform the reader, that the case, now before him, is not one which frequently occurs. I do not recollect having, in the course of my practice, had more than about thirty of them entrusted to me. But having, in the course of many years, observed a certain peculiarity in the disease, I took notes of most of the cases, which came under my notice, conceiving that I might, at some future time, be thereby enabled to afford useful information to the public, on the treatment of this complaint.

"These cases occur more frequently at the middle period of life, than at any other.* In most instances, that came within my observation, the preceding fever was of considerable duration; and sometimes so violent, during its continuance, as to confine the patient to his bed, and often to be attended with delirium. Some time after the patient's recovery, he was seized with pain in one of his legs. The period at which this pain commences, is not the same in every case. In some patients, it takes place immediately on the termination of the fever; in others, it is not

---

* I took notes of twenty-two cases which have been under my own care, the ages of these are as follow;

Of the age of 14	- -	1
——— 18	- -	1
——— 19	- -	1
Between 20 and 30	- -	7
——— 30 and 40	- -	11
——— 40 and 50	- -	1
		22

experienced

experienced [illegible] a few days afterwards; in others again, not till several weeks, and [illegible] others, not till many months have elapsed. Yet I should observe, that I have always found the disease to make its attack, within twelve months from the termination of the fever."

The phenomena and symptoms of the complaint are described with minuteness and precision.

"In most of the cases, the pain in the leg was acute, and appeared to the patient to proceed from the interior of the Tibia. The pain, indeed, was not equally violent in every case; as some of the patients were confined to their bed for several days, or weeks, and deprived of sleep for a considerable time; while others were able to go about. No external swelling or inflammation is, in general, to be expected, immediately on the commencement of pain. Yet these appearances are seldom long in following; they are usually visible within a week, and sometimes in two or three days. In some cases, a general inflammation and swelling over the whole limb first appeared, and soon after a more circumscribed inflammation, near the affected part of the Tibia, in which a fluctuation of pus might be felt. In other cases, the inflammation and swelling never extended to the entire limb, but were, with the subsequent formation of pus, confined to a small circle on the Tibia. In most instances, the suppuration was confined to one part of the Tibia; and this was often about the middle of the leg, and the centre of the bone. In many cases, however, the suppuration took place in other parts of this bone; namely, within a few inches of the instep, a little below the knee, or in some of the intermediate spaces. Sometimes it has happened, that two or more distinct suppurations, and as many separate openings into the cavity of the bone have taken place. These were sometimes found within an inch or two of each other; at other times further apart. There was some variation likewise, as to the time of their appearance; some weeks elapsing between the commencement of each suppuration, in some cases, while in others, all appeared nearly at the same time.

"Although a fluctuation of pus might be discovered, within a short time after the disease had taken place, the matter did not usually burst through the skin as hastily as it does in some other suppurations. This discharge, however, sometimes took place within a week or two, from the first appearance of matter; but in many cases, the pus continued in a confined state, for many months, and required the use of the lancet to set it free.*

"In most of the cases, the violence of the pain ceased: the inflammation and swelling abated, as soon as the fluctuation of matter was felt; and in a short time afterwards, the patient was generally able to walk about. Soon after the discharge of matter, the wound usually contracted to so small a size, as scarcely to admit the point of a probe; and a small quantity of pus continued to ooze from the aperture. In

* In the greater number of cases, the suppuration is small, often containing not more than a tea-spoonful or two of pus. In other cases, however, I have seen a larger suppuration, in which, an ounce or more, of matter is formed.

some cases, however, the ulcers closed up for a few d[illegible]d then burst out again.—If in this state of the disease, a probe is [illegible]carefully into the little orifice of the ulcer, it usually enters readily, [illegible] the cavity of the Tibia,* where the loose piece or pieces of exfoliated bone are frequently to be felt. Under these circumstances, I have never known a perfect cure to take place, unless where the appropriate treatment had been resorted to.

"In this disease, the surface of the Tibia, immediately around the orifice, becomes often, though not always, knotty and irregular, and the periosteum is sometimes thickened, so as to give an appearance, resembling that of a venereal node. This disease, however, differs totally from those affections of the Tibia produced by syphilis, as it does likewise from those usually denominated necrosis, or from any of those which are produced by scrophula. In short, as far as I have been able to observe, it is a disease sui genèris, the relic of fever usually affecting the Tibia.†

"From the violence of the pain, and sudden erosion of the bone, an inflammation appears to attack its internal part. Suppuration takes place, and matter is first formed there, and then makes its way through the substance of the bone, to the outer integuments.—As, however, the ulcerative process in the bone sometimes takes place in different parts, thereby producing several apertures in the Tibia, matter is, in these cases probably, formed in distinct places, previous to the ulcerations in the bone. One of the most remarkable circumstances attending these cases is, that one or more pieces of loose bone are usually found within the cavity of the Tibia, opposite to each aperture.

"Some of these exfoliations are so small and thin, as to require a nice examination with the probe, in order to discover them. They are, however, generally found of a larger size, sometimes even exceeding an inch in length. I have always found these exfoliations of an oblong and spiral shape, and evidently separated from the internal laminæ of the Tibia within the cavity of the bone. The separation of such a portion of bone is probably the effect of the previous inflammation and ulceration; by which it is deprived of circulation, and of course loses its connection with the living bone, of which it was once a part."

Having enquired into the probable cause of this disease, and passed through the various appearances it assumes, the author proceeds to describe the curative process.

"During the painful and inflammatory state of the disease, and before the erosion of the bone has taken place, it would be proper to apply emollient fomentations and poultices to the limb: to keep the patient in bed; and to endeavour to ease the pain, by occasional doses of opium. I must confess, however, that I have seldom seen the disease in this stage. I have commonly been applied to, after the erosion of

---

* In one or two cases, I have perceived this orifice so small, as not to admit the round end of a probe, of the usual size. In a few other cases, it has been so oblique, as to be entered with much difficulty by that instrument.

† I have some recollection of having, many years ago, seen this disease in the Fibula; but in that case, the Tibia was likewise affected.

the

the bone has taken place, and when the patient has been, in some measure, able to follow his usual employment. In this stage of the disease the cure of the ulcer, by the common external remedies, is impossible, the loose piece or pieces of bone, pent up within the cavity of the bone, must set that mode of procedure at defiance. The imprisoned exfoliations, therefore, must be extracted, and this is desirable to be done, by the mildest methods possible; avoiding all unnecessary pain and operations to the patient.

"The loose bone within the cancelli, is commonly longer than the ulcerated aperture in the bone. It is in many cases, indeed, considerably longer, and though confined to its situation, it may sometimes be taken hold of by a pair of forceps, and moved upwards and downwards, in its bony case. The examination by the probe should, therefore, be made with great care and gentleness; otherwise, much unnecessary pain will be excited. It may happen also, that the exfoliated bone may be removed from the favourable situation it is in, when it is directly under the ulcerated aperture, and be pushed under the arch of the Tibia, as I have more than once experienced; by which the difficulty of extracting it must be greatly increased.

"As the orifice in the Tibia, as well as the exfoliations, are of different sizes in different cases, and as these are generally covered by the integuments and granulations, it requires a nice examination with the probe, to ascertain the true state of the parts. In some cases, as before observed, the aperture in the Tibia is so small, as not to admit the round end of the probe, to pass into the cavity of the bone, and the contrary end, or an eyed probe, will pass into it with so much difficulty, that no accurate examination of the parts beneath can be made. In most cases, however, it freely admits the round point of a probe; and our attention should first be directed, to find out the size of the aperture in the bone. Having ascertained this, we should next examine, whether there be a loose piece of bone within the cancelli. The size of the aperture may be known, by passing the probe, in a gentle manner, from side to side in all directions. But it is not so easy, either to find out the exfoliated piece, or to ascertain its exact dimensions, when discovered.

"Where the aperture in the Tibia is large, and the exfoliated piece very small, the latter may be moved about, with the end of the probe, so readily, as to leave no doubt of its easy extraction, by the introduction of a pair of fine forceps. Under such circumstances, the operation should be instantly performed; and if the whole be removed, the wound will generally heal up in the course of a few weeks: the application of any common dressing, aided by bandage, will be sufficient for the purpose. The utility, therefore, of first examining with great nicety, by the probe, in order to avoid, if possible, the use of more violent remedies, must be evident.

"In more difficult cases, the exfoliated piece may, likewise, be readily moved in the cavity of the bone, by the end of the probe; yet the hand of the operator will be sensible that it is confined, by the sides of the surrounding Tibia. In some cases of this kind, the opening in the Tibia may be large enough to admit of our taking hold of the exfoliation, by a pair of common forceps; but in others, it is so small, that

a

a pair of the finest forceps that can be made, cannot be made to enter, so as to embrace the bone. When possible, we should endeavour to extract the exfoliated bone by the forceps; and in these attempts I have readily succeeded, when the exfoliation was not longer than the aperture in the Tibia. But where it proved to be of greater length, which might be known, by its being moved upwards and downwards in its bony case, by the forceps, but whence it was not possible to extract it; I have been sometimes able to accomplish the extraction, by moving it upwards or downwards, as far as it would go, and then raising one end of it. Where I could not succeed by this procedure, I have been sometimes obliged to resort to a more violent method, that of endeavouring to break the exfoliation into two parts, by means of the forceps. This I have been able to do, where it has not been very strong, and having thereby extracted it, the cure has been speedily completed.

"There are other cases, however, in which methods, very different from those, must be taken. We may have the strongest reasons for concluding, that there is a loose exfoliation, within the cancelli, and yet may not be able to feel it by the probe. In this case, as well as when the opening in the Tibia is too small, to admit an exfoliation to pass, by any of the methods above described, we must apply the kali purum to the integuments around the ulcerated opening in such a manner, and in such quantity, as to destroy them, to the extent of about half an inch from the centre of the opening. This is done with a view to expose as much of the surface of the Tibia, as is requisite for the cure.* The proceeding, here recommended, is attended of course with some pain; and it requires particular attention, in order to prevent the kali from destroying more of the integuments than is necessary; and from penetrating through the orifice into the cancelli.

"This caustic may be applied in several different ways. That which I prefer is, to take about as much of it (bruised into parts of the size of a pin's head) as will lie upon a seven shilling piece, and apply it, both to the ulcerated opening in the skin, and to the surrounding integuments, to the extent already mentioned. Pieces of dry lint, or adhesive plaister, should be applied around the caustic, to prevent it from extending on the adjoining skin. In a few minutes, the kali liquifies, and begins to operate.

"The leg should be placed in a horizontal position; and if the caustic appear to act equally, the limb must remain in that position for about ten minutes, or a quarter of an hour; after which, a pledget of dry lint should be applied over the kali, large enough to cover the adjoining sound skin. The leg should then be slightly bandaged with a flannel roller.

"It is to be observed here, however, that during the action of the caustic, some additional attentions are not unfrequently required, in order to ascertain the depth to which it has penetrated. If in one part, the integument is thicker than in another, or if the caustic is acting more

---

* The orifice in the bone is situate so near to an angle of the Tibia, in some cases, that it does not admit of its being exposed, to the extent of half an inch, on all sides of it.

powerfully

powerfully on one part than on another, a little of it may be removed with the probe, to or from such part; or a little more fresh caustic may be applied to any particular part, if it appear to require it. During the action of the caustic, particular attention must be paid to its effect on the little ulcer on the skin, and on the orifice in the Tibia, as it is desirable to prevent its penetrating the cancelli, much harm and disturbance being likely to arise from its action on this part.

"If the integuments adjoining to the wound be thick, the kali may be applied to this part, nearly in the same quantity as to the other parts; as, in general, it ceases to act, before it can penetrate into the cancelli. But if the integument, on this part, be very thin; or if there be no integument or granulation over the ulcerated orifice, a small piece of lint should be passed down it to the cancelli, previous to the application of the kali, to prevent it penetrating too far: a piece about the size of a pea will generally be sufficient. This should be rolled with the finger and thumb, and firmly pressed down the orifice by a probe, till it passes into the cancelli; where it should remain. If this should not perfectly plug it up, a second, or even a third pledget should be applied. This is often attended with some pain, from the pressure made on the granulated flesh, at the bottom of the wound, which generally springs from within the cancelli, and is exquisitely sensible. The kali should remain on the part to which it is applied, for about six hours. After this, the wound should be dressed twice a day, with some dry lint, and an emollient poultice. In about a week, or ten days, from the application of the caustic, the slough will come away.

"If the caustic have performed its office, the surface of the Tibia will be perfectly bare; and now the unequal, knotty state of the bone, and thickening of the periosteum, will often be seen; and if the granulations on the surface of the orifice have been destroyed by it, the loose exfoliation within the Tibia will often be visible to the naked eye. But where the granulations are not destroyed, the internal exfoliation cannot be discovered without introducing the probe into the wound, as before directed.

"Sometimes the surface of the Tibia around the ulcerated aperture, will be found, on the separation of the slough, not to be sufficiently exposed.---In this case, a little of the kali must be applied a second time, to such parts as require it. This should be done in the course of a few days, otherwise the wound will begin to fill up with granulations. Though a repetition of the caustic is seldom attended with as much pain as accompanies the first application, it being seldom necessary to destroy a fresh portion of the skin; it should nevertheless be applied with all the precautions, recommended in the first instance; the like dangers being to be guarded against, on the subsequent application as on the first. It must be remembered, however, that a proper quantity should be applied, otherwise the surface of the bone will not be sufficiently exposed, when the new slough separates. When the second application has been properly conducted, we seldom have occasion for a third.

"The surface of the Tibia, with the aperture into its cavity, being thus exposed to view, we proceed to search for the loose exfoliation, if it be not already visible. The orifice in the Tibia must again be carefully

fully examined by a probe, and as this examination can now be assisted with the eye, the size and situation of the exfoliated piece will for the most part be readily discovered. If indeed the granulations within the cavity of the bone shall not have been destroyed by the caustic, some impediment to the examination may arise from them, as they are in general extremely sensible, and are apt to bleed, on the slightest touch of the probe. But as the exfoliated piece generally lies buried in these granulations, and is perfectly detached from the contiguous bone, it may frequently be discovered, by its yielding to the pressure of the probe.

"Its situation being discovered, and its size, compared with that of the aperture in the Tibia, pretty fairly ascertained, we must endeavour to extract it by the forceps; and sometimes we shall succeed, where the endeavours made, previous to the application of the caustic, have failed. The exfoliated bone, however, will often be found to be larger than the opening in the Tibia, in which case it will, in general, be impossible to extract it, till the orifice has been widened.

"If the trephine be used for this purpose, it may be sometimes difficult, though probably never impracticable, to remove the piece encircled by the instrument after it has been worked to a proper depth. I remember to have succeeded many years ago by this method, in extracting a large piece of bone, pent up within the cancelli. The case to which I allude occurred to me when I was a very young practitioner, and has been already published. From the date of this operation, there has not occurred a single case in my practice, in which I have found it necessary to use the trephine. I have, for some years, practiced with great success a method of enlarging the opening in the Tibia, which is much more simple, as well as less painful. It is by means of the kali purum; and the way in which I use it is as follows: I apply this caustic to the bare surface of the Tibia, around the hole, and to the sides of the hole itself, after the separation of the slough; taking care to guard against its touching the adjoining parts, or penetrating into the cavity of the Tibia: each of which dangers may be prevented, by the application of the lint, as before directed. In about ten minutes after the application of the kali, the bone should be covered with a pledget of lint; and on the following day the kali should be again applied to all the parts, as before. After this the limb should be dressed twice every day with a fresh poultice; it should be lightly covered with a flannel roller, and the patient may be generally permitted to take moderate exercise. In a month or less from this period, an exfoliation of all that part of the bone, to which the caustic has been applied, will take place.* This effect may be known by occasionally pressing a probe upon the surface of the bone. For when the intended exfoliation is accomplished, the ex-

* I have not known this exfoliation take place in less than three weeks from the application of the caustic, and it happens, not unfrequently, that it is not separated in less time than a month. The granulated flesh around it, therefore, generally covers this dead part of the bone before it is taken out. This, of course, obscures it from the view, but when loose, it is as readily extracted, with the loss only of a few drops of blood, as if it was perfectly exposed.

foliated

foliated piece gives way, on the pressure of the instrument. I do not, however, suffer it to be removed immediately on discovering its separation from the body of the Tibia; but generally let it remain in its situation two or three days, in order to give sufficient time for its being completely disengaged, that it may be removed with less danger of being broken. I then complete the removal in the most gentle manner; sometimes by the forceps, sometimes by passing either the one side of a pair of forceps, or a director, under it, as circumstances may dictate.* Having proceeded thus far, my attention is next directed to the removal of the loose pieces of bone within the cancelli. In almost every instance in which the process above described has been followed, I have found this bone at perfect liberty. But before I attempt its extraction, I always introduce a probe, in order to ascertain its exact position. In most of the cases which have come under my care, it is readily felt by the probe; but the practitioner should be prepared to meet with some disappointment here. There are cases, in which, from its smallness, it is not only extremely difficult to find the imprisoned piece, but even to discover any vestige of it, on the first examination. In three cases I found it so small as to require a very nice management of the probe to feel it; in two of these cases, the loose piece was found immediately after the enlargement of the aperture in the Tibia was accomplished; in the third case, it was not found till two days afterwards. Out of the whole number of cases, which have occurred in my practice, I can advert only to one in which I have searched in vain for it: nor do I feel warranted to conclude, that even in this case there was no such piece; but rather suppose, that, by its minuteness, it either eluded the search with the probe, or escaped unperceived in the dressings. This solitary instance occurred, before I was aware how very small some of these pieces are found to be. In the three cases I have mentioned, the loose pieces found would have escaped my notice, had I relaxed but a little of that perseverance with which I searched, and any conclusion against their existence, drawn from the disappointment, would, of course, have been erroneous.

"After having enlarged the aperture in the Tibia, by the caustic process, already described, and having found the loose exfoliation, I have in almost every case been able to extract it. There has, however, been an instance or two, in which it has been found still too large to pass through the aperture; although it could be moved upwards and downwards, in its bony case. In these cases I have been obliged to adopt the method already described in page 11; viz. of breaking the loose bone into two parts, in order to liberate it from its confinement. Had I not been able to do this, I must probably have been obliged to make use of the trephine.

---

* This exfoliation generally exhibits a very curious appearance. From an examination of seven or eight pieces of bone thus exfoliated, from as many different cases, it is evident that the ulcerative process, at the commencement of this disease, erodes the substance of the Tibia, in this part, to such a degree, as to render the enlargement of the hole, by the caustic, more certain, than it would have been, had the Tibia been of its usual thickness.

"Having carefully examined all the pieces thus extracted in the different cases which have come under my observation, I have invariably found them to be exfoliations of the interior laminæ of the Tibia; no marks of affinity with the external surface of the bone having been found on any of them. I am likewise certain that none of the exfoliated pieces extracted from within the cancelli, were any part of the exfoliation made by the caustic, for the purpose of enlarging the hole in the Tibia. The greater number of them were ascertained to be within the cavity of the bone, before any caustic was applied to the Tibia. Besides which, I should inform the reader, that the pieces exfoliated by the caustic were removed with so much care, that no fracture of them was likely to occur; and if it had, it must have been perceived.

"After I have extracted one piece of bone from within the cancelli, I examine the bottom of the wound with a probe, to ascertain whether there be any more pieces: this I continue to do occasionally for about a fortnight, knowing that no cure can be obtained if any portion of bone be left behind. The hole indeed would fill up with granulations, but a small oozing wound would remain. When the cancelli are cleared of these exfoliations, the wound should be dressed in the most superficial manner, and with the most simple dressings; applying compresses and a roller lightly over them.---In the greater number of these cases, the skin is perfectly cicatrized in the course of six weeks, or two months, from the removal of the exfoliated pieces; and the inequality on the surface of the Tibia is generally removed. The scar, indeed, and the external appearance of the leg, is somewhat different, after the cure in these cases, from what I have observed in most others. In a few instances, however, I have seen the wound continue open for several months, after the removal of the bones. In one case, indeed, it continued open nearly two years, during which time a probe could be passed within the cancelli, to the extent of four or five inches; but no material inconvenience accrued from it to the patient during this interval, and it afterwards healed up."

Under this treatment, the usual termination of the disease, with Mr. Whateley, has been in a speedy recovery. There have, however, occurred sometimes severe symptoms, which have not only endangered the limb, but have even destroyed the patient.

In two cases, in middle aged women in the intervals of child-bearing, the *infortunia* were most formidable, and the consequences extremely serious.* They are attributed by the author, to a violent use of the forceps in extracting the exfoliations from the cavity of the *Tibia;* but they are more fairly

---

* These were violent inflammation, attended with great pain, extending itself through almost the whole of the Tibia; and the formation of pus on the surface of its different sides, in almost every direction, as well as within the cavity of the bone. In one of these cases, the symptoms arose to such a height, as to destroy the patient in the course of a few weeks. In the other, the patient survived; but the irritation and inflammation were so great, for the first six months, as at length to leave the Tibia eroded through its entire thickness, a little

referrable to the patient's walking considerable distances while under surgical treatment, and serve as a proper warning to those who may have the management of similar cases; and will induce them to confine their patients to the house, if not to the bed, during the treatment.

The remaining part of the essay consists of twenty-two cases, with a plate and explanations.

The value of this pamphlet arises from its practical utility, and as affording additional information from that best source, an observance of nature, on a disease, though not of frequent occurrence, of great importance. If we differ in some points, possibly of opinion only, with Mr. Whately, we admit in the fullest manner the service this species of medical literature is to the science; where, even if the hypothesis be wrong, the facts, if correctly observed and faithfully related, afford materials for a more legitimate theory, and more certain conclusions.

"This disease," says Mr. Whately, "differs totally from those affections of the Tibia produced by syphilis, as it does likewise from those usually denominated NECROSIS." There certainly are no facts that can induce us to suppose it has a syphilitic origin; but that it is a species or variety of the disease examined and so well described by Mr. Russell, (*Practical Essay on a certain Disease of the Bones, termed Necrosis*, 8vo. Edin. 1794), and by Professor Weidman, (*De Necrosi Ossium, fol. Francfurti ed. Mœnum*, 1793), there is surely but little doubt. The disease which these writers have described in the advanced period, Mr. Whately has seen in the incipient state; or, possibly, in a mild variety, where only a small portion of bone has perished, but which being confined within a bony sheath, has kept up ulceration, until it has been removed. There are some particulars, however, in which the disease described by Mr. Whately differs from the definition of *Necrosis*, as given by Mr. Russell. In Mr. Whately's cases there seems to have been simply an exfoliation of the internal substance of the Tibia, which falling down among the cancelli and lying loose, keeps up an irritation and purulent discharge; while in the cases that Mr. Russell denominates *Necrosis*, a covering of new osseous matter surrounds the dead bone. The period of attack is likewise different. Mr. Russell found *Ne-*

---

little below the knee; where, on moving the limb, a kind of joint was observable. By the use of opium, fomentations, and emollient poultices, (the limb being kept in an horizontal position) the disease gradually abated; and after some large exfoliations from the substance of the Tibia had been thrown off, the use of the limb was restored.

crosis to be properly a disease of the early period of life. "I have never known," he says, (p. 92) "a case of it in which the attack began after the twentieth year, except in cases of *Necrosis* of the lower jaw. About the age of puberty, or from twelve to eighteen years of age, is the time of life at which patients are most liable to be attacked." Mr. Whately found that in twenty-two cases, eighteen occurred to persons past thirty. We are disposed to think, from some cases that have fallen under our own particular knowledge, as well as from an examination of the numerous *sequestra* preserved in an anatomical museum of great extent, that Mr. Russell has too much contracted the period in which this disease attacks; and that its depredations in advanced life are not confined to the lower jaw. Professor Weidman gives a plate (*Tabula tertia*) that so much resembles the plate, and so closely accords with the description given by Mr. Whately, that the identity of the diseases seems very completely established.

The mode of treatment here adopted for enlarging the opening in the Tibia, through which to extract the *sequestra*, does not quite agree with the dexterity of modern surgery: neither does it appear to us adequate to the object. We assert this, subject however, to the correction which the great experience of Mr. Whately can well supply.

A Commentary on the Treatment of Ruptures, particularly in a state of Strangulation. By E. GEOGHEGAN. 8vo. pp. 95, London, 1810.—HIGHLEY.

To deviate from the common path of the profession with safety and success, is not the work of ordinary minds, and he may justly be considered as the benefactor to his art who shall suggest any real improvement in the treatment of a disease which has occupied the attention and the pen of so many eminent writers. The interesting little work before us has, besides its intrinsic merit, a claim to our notice, in as much as the subject was many years since opened in the pages of this Journal. In the year 1800, the author published some observations on this disease, in our 4th volume, and his farther experience has confirmed him in the validity of the opinions he then advanced. The present Commentary on the treatment of Hernia, begins with a detail of the general directions given by different authors to accomplish the reduction by the hand, and after citing the opinions of Mr. Pott, Dr. Munro, Mr. Bell, Mr. Cooper, and Mr. Lawrence, the author says, (p. 28)—

"When

When I consider the talents, and the extensive opportunities which these writers possessed, it is not without anxiety that I contest their opinions; but experience has abundantly shewn that they are ineffectual in practice, and I feel a conviction that they are unsupported by theory. I have given their own words that their full meaning may the more clearly appear, and that my inference may the more readily be understood.

The first objects for our consideration, are the structure of the parts concerned, the phenomena which the disease exhibits, and the pathology which may be fairly induced. When Hernia has taken place in the groin, it has passed through two apertures; that which is next the abdomen, is formed by the tendon of the Transversalis and internal oblique muscles, and a fascia that lines the transversalis; the external aperture is formed by a separation of the tendonous fibres of the external oblique muscles; they are filled up with the spermatic chord in males, and by the round ligaments of the uterus in females; they form an oblique canal, which in old ruptures becomes straight, or nearly so. In crural Hernia, it passes under Poupart's Ligament, through a small aperture, in a tendon formed for the transmission of the femoral vessels; during a length of time it slips in and out of the abdomen uninterruptedly, a circumstance to which I would particularly direct the attention; suddenly after any great exertion of the body, such as lifting a weight, coughing, sneezing, &c. or external injury, it refuses to return into the abdomen; on examination it appears tumified, tense, and inflamed, accompanied with excessive pain, and derangement of the functions of the viscera, and universal disturbance, the inflammation rapidly increases, the distension is prevented by the rigidity of the tendinous aperture, or by the neck of the sac which contains the intestine—hence strangulation.

The author then goes on to state, what, however, has been stated by others, but the consequences which he deduces are his own, and important; that the strangulation and its symptoms are not produced by any altered state of the abdominal aperture, and that the inflamation and enlargement of the intestines are the essential points to be considered.

He then observes,

"From what has been stated, it appears that the indication of cure generally laid down, is not warranted by the nature of the disease, nor of the treatment, namely, to return the Hernia through the apertures by pressure with the hands, because, as mentioned before, it is not the situation of the intestine, it is the enlargement of it which occasions the symptoms, and that state should, in the first instance, forbid the attempt on account of its obvious impracticability."

These remarks lead the author to, and prepare the reader for a very material alteration in the treatment of strangulated Hernia in its first stages, which we shall state in his own words.

"With the view of affording a satisfactory explanation of the practice which I think ought to be pursued, founded on the principles which I have endeavoured to establish, I shall describe my own manner of treating a case, and the order which I think ought to be followed, and

which

which has succeeded under my arrangement in, I believe, more than 36 cases since the year 1796.

I place the patient in a recumbent position, with his shoulders a little raised to relax the trunk, but the pelvis not raised, as that would put the fasciæ on the stretch; the knees are to be drawn up, if the parts have not been irritated by handling them, or the body disturbed by jolting it about, or by any such roughness, I proceed directly to apply cloths, wet with cold water, expose the entire body naked to the air, the doors and windows being open. This practice usually succeeds within an hour,* if it does not, I surround the Hernia with my hand, or hands, at about its middle, in the way that I would grasp a gum elastic bottle, to press out its air, or other contents, by gently approximating its sides, always holding in view that the tumor is to be emptied, and not pushed up,† and that a little assistance to the compressing force, which the coats of the intestine, (re-acting from distension) are exerting, by lessening its area, even in a small degree, the air will be strongly impelled against the part of the tube which is closed, and through which it is only necessary that it should obtain exit, to effect our purpose. When it is small, as in femoral Hernia, or in protrusions, which do not pass below the groin, or are elsewhere situated, it may be done with the fingers and thumb of one hand;—having applied the hands, I do not remove them for fifteen or twenty minutes, aware that reiterated impulses irritate, and that the effects of compression are lost each time that it is intermitted.

Cases which have been long strangulated, and those which are accompanied with great pain and tension, are exceptions to this practice, so far as the employment of the hand, on the principle that the re-action of the intestine is at a pitch sufficient to propel the air through the coalessed tube, if its passage is possible, and that handling parts in such a state would endanger mortification or rupture of them. My chief reliance in such is on bleeding, proportioning the quantity by nearly the following scale:

If the patient is young and robust, I take off sixteen ounces; if old, or weakened by previous illness, from six to ten ounces, should even debility ‡ take place if attended with great pain, I repeat the bleeding after three hours; but if the pain yields, I omit it; all this time I apply nothing topically, except cold water, and strictly avoid all attempts with the hand.

I direct no medicine internally, and by these means I have succeeded in the instances before mentioned, and I am persuaded that they will scarcely ever fail, provided, that the taxis in the usual manner had not been practised, and that such other exasperating causes, as putting the

---

* In some cases where I could not immediately attend, I have directed that cold applications should be used until my arrival, and after an hour, they informed me that they were seized with a shivering, that they heard the wind rush out of the hernia, and that they were instantly relieved.

† I never press the hernia in any direction, or at all towards the aperture.

‡ It is very material in this, indeed in every disease, to discriminate between that debility which is the effect of pain, anxiety, and restlessness, and that which is the effect of impaired health or of original constitution; in the former, bleeding is advisable, in the latter it is generally improper to any extent.

patient

patient with his head to the ground and his heels up, and jolting him about, had been omitted.

Strangulated Hernia, under this treatment, will in many cases continue several days without serious mischief, and in the event of the operation being required, peritoneal inflammation will be provided against.

The tobacco glyster is the next remedy which I would advise; in a robust subject in the proportion of one drachm to a pint of water, which I would repeat of double that strength, if the first produced no effect; in an enfeebled person, half a drachm should be first tried.

In the event of failure in our efforts to remove the strangulation, the operation of enlarging the apertures by the knife must be had recourse to; the precise time at which we should lay aside all other means, and commence this practice, is not easily decided on.

In a young and full person suffering great distress, I would not defer it longer than six or eight hours, particularly if the Hernia had been much handled, and also if bleeding had not been used; but where no mischief had been produced by external causes, and this evacuation had been premised, it might be deferred sixteen or twenty-four hours, always watching if the belly became sore to the touch, or much inflated, in which case to operate instantly. In an aged or debilitated subject it may be delayed longer. I have known it to continue in such, six, seven, or eight days, and afterwards to be removed without an operation.

Such is the treatment, and such the means which the author recommends in the strangulated Hernia previous to operation. The points on which he differs from others are, chiefly, abstaining from violent attempts to reduce the gut, and objecting to the use of purgative medicines. He is the advocate of bleeding, of the application of cold, and, in short, of every antiphlogistic plan to reduce the size and inflammation of the intestine preparatory to its return. On the whole, we consider this commentary as a valuable addition to our information on a disease of great importance, both from its frequent occurrence, and the imminent danger which accompanies it, and we therefore strongly recommend the work to our readers.

An Account of Diseases in an Eastern District of London, from Oct. 20 to Nov. 20, 1810.

ACUTE DISEASES.			
Pneumonia	3	Dysmenorrhæa	2
Cynanche Tonsillaris	4	Leucorrhæa	6
Variola	9	Dysuria	4
Morbilli	8	Hypochondriasis	1
Rheumatismus Acutus	3	Chorea	1
CHRONIC DISEASES.		Rheumatismus Chronicus	6
Tussis	10	PUERPERAL DISEASES.	
Dyspnœa	8	Menorrhagia Lochialis	3
Tussis cum Dyspnœa	7	Ephemera	2
Phthisis Pulmonalis	2	Dolores post Partum	5
Hydrothorax	3	Dysuria	4
Asthma	1	INFANTILE DISEASES.	
Cholera	2	Convulsio	1
Diarrhæa	4	Rachitis	2
Enterodynia	5	Tabes Mesenterica	3
Menorrhagia	3	Vermes	4
		Dentitio	2

The Small Pox has lately prevailed to a very considerable degree. The infection has been propagated very diffusely: whole families of children have been affected by it, and, as the consequence of an intercourse kept up in the neighbourhood of some confined situations, the disease has spread to a very great extent. Most of the cases referred to in the list were attended with very unpleasant and dangerous symptoms, the number of pustules was large, and the disease of the confluent species. In one of the cases a fatal termination took place.

In many of the patients who were visited by this loathsome disease it has been succeeded by some morbid affection of the eyes. A considerable redness and fullness of the vessels of the tunica conjuctiva, attended with an intolerance of light and a great flow of tears, indicated an inflamed state of the organ.

The Meazles have likewise been very frequent of late, and, as in the Small Pox, have been accompanied with a train of unpleasant symptoms. Pneumonic affections have been almost the constant attendants upon the disorder, and these have continued to harass the patient for a considerable time after the eruptive disease has gone through its usual stages.

MEDICAL AND PHILOSOPHICAL INTELLIGENCE.

Professor Ignatius Colla has related in a recent number of the Journal of the Medico-chirurgical Society of Parma, two cases of Tænia, which were cured by half a drachm of the fresh powder of cannabina (Eupatorium *Arabum* Pharm. Paris. Agrimonia Linn. Hemp Agrimony], and an emeto-cathartic, prescribed for obstinate indigestion. Eupatorium or agrimony* is now scarcely known as a medicine in this country, but was formerly in great esteem in several complaints, particularly in cholic, gout, and jaundice; but we believe its efficacy in Tænia has not been noticed by former writers. Sir John Hill observes, " in the worst degree of the jaundice, and under its most dreadful appearances, the greatest dependence may be placed upon the celebrated herb agrimony." Its properties are well described by Dr. Baylis, in his " Compleat Body of Practical Botanic Physic."

The operation for Empyema has latelybeen successfully performed at the Hospital at Gottingen, in a case of Hydrothorax. On the sixth of August 1808, a man, aged 23 years, was brought to the hospital at Gottingen, and placed under the care of Professor Himly. He had been previously affected with fever. After his admission, his feet became œdematous, his face slightly swelled, and his respiration difficult. The œdema soon became general, and the dyspnœa very distressing; the patient could not lie on his left side without being threatened with immediate suffocation. The complaint was supposed to be hydrothorax, and the treatment usually pursued in that complaint was vigorously put in practice, but without effect. On the 30th of August, the patient being at the point of suffocation, it was determined to perform the operation of empyema. The incision was accordingly made on the right side, between the fifth and sixth true ribs. A considerable quantity of fluid escaped through the orifice, and as it flowed, the respiration became easier. On the 31st, serum continued to flow abundantly from the wound; the patient felt much relieved, the œdema sensibly diminished, respiration became almost natural, and there was little fever. On the 19th of September, the symptoms of hydrothorax seeming to return, the wound was opened again, and about an ounce and a half of water was drawn off in the space of a minute. The patient was immediately relieved, and on the second of November quitted the hospital perfectly recovered.

The particulars of this interesting case were communicated by Dr. A. Schonberg, to A. L. M. Lullier, D. M. P.

---

* This is not the plant commonly known as Agrimony (*Agrimonia Eupatoria.*—Linn.) but is the *Eupatorium cannabinum*, (class *Syngenasia æqualis.*) Vernacular—Hemp Agrimony; Dutch Agrimony; Water Agrimony; Water Hemp; common Hempweed; banks of rivers and brooks; flowers in July and August; perennial. It is a common plant by the sides of ditches in the fens of Cambridgeshire. An infusion of a handful of it vomits and purges smartly. An ounce of the root in decoction is a full dose. In smaller doses the Dutch peasants take it as an alterative and anti-scorbutic. Goats eat it. Cows, horses, sheep and swine refuse it. We have added this explanatory note, that should any of our readers be disposed to employ it, they may not take for it the *inert* plant. Agrimony, so well known, for its fancied medicinal properties, and growing in every upland pasture.—Editor.

Hufeland's Journal of Medicine and Surgery for 1808, contains a case of numerous small worms being found in the urine of a child aged three years. It had previously passed several by stool. Dumonçeau has stated a similar fact; and Dr. Kuhn has published a dissertation entitled, Dissert. de Ascaridibus per Urinam emissis, Jena, 1798.

The same Journal contains an account of an imperforate anus. A male infant was born with an obstruction of the anus, occasioned by a prolongation of the skin, in the form of a band, which extended from the coccyx to the raphè, and passed over the anus to which it closely adhered. A small hole, however, was observed on each side, directed towards the rectum, and on pressing the abdomen, a serous fluid and gas passed through one of them. On the sixth day, from the convulsive cries of the infant, and the retention of the mæconium, the malconformation was discovered. Tension and hardness of the belly, redness of the face, violent hiccups, and frequent vomiting, indicated extreme danger, when M. Moucelot, by a simple operation, cleared the external orifice of the anus, and gave vent to the matter accumulated in the rectum. The alarming symptoms soon ceased, and at the end of three days the child was entirely well.

COW-POCK INSTITUTION, Dublin,

UNDER THE PATRONAGE OF

His Grace the Lord Lieutenant, No. 55, Sackville-Street.

Opened on the 14th of January, 1804, under the Direction of the undersigned Physicians and Surgeons of this City, for the purposes of securing a succession of Cow-Pock Matter, by inoculating gratuitously the Children of the Poor, and of supplying the different parts of the Kingdom with genuine Infection.

DIRECTORS.

Physicians.	*Surgeons.*
JOSEPH CLARKE,	GEORGE STEWART,
JAMES CLEGHORN,	RALPH S. OBRE,
THOMAS EVORY,	SOLOMON RICHARDS.

An Abstract from the Register of Inoculations and Distribution of Matter.

	Patients Inoculated.	Packets issued to Practitioners in general	Packets to Army Surgeons.
1804	578	776	236
1805	1,032	1,124	178
1806	1,356	1,340	220
1807	2,156	1,790	320
1808	3,002	2,285	333
1809	3,941	2,540	244
Totals.	12,065	9,855	1,537

The Directors of the Institution have great pleasure in observing the progressive increase of *Vaccine Inoculation*, and the influence of experience in satisfying the Public of its efficacy. Most of the above 12,065 patients being confined to a city, where Small-Pox has been in general prevalent, must have been exposed in every possible way to its infection, by living in the same house, or frequently sleeping in the same bed with the infected. The anxiety of parents too, has often led them intentionally to expose their children to SmallPox infection. As far, however, as the immediate observation of the Institution extends, Cow-Pock has been found to resist all such trials, with three exceptions only.

It now appears by increasing experience, that in *a very few instances*, the vaccine infection will form fairly on the arm, and go through its regular stages, without being absorbed into the blood. The same thing has repeatedly happened in inoculating for the Small-Pox, where no eruptive fever or eruption succeeded the inoculation. In the three cases of Small-Pox which have succeeded vaccination, the disease has been mild and of short duration.

The efficacy of Cow-Pock, as far as Dublin is concerned, does not rest upon the proofs adduced in its favour by this Institution, for it has been extensively practised during the last five or six years. There are grounds for believing that the number vaccinated throughout the city, including the above 12,065, does not fall short of 35,000. The cases of Small-Pox following Cow-Pock, which have been reported, upon any reasonable authority, to the Institution, do not exceed six. No one who is acquainted with the careless and inattentive manner in which many practitioners have hitherto conducted vaccination, can be surprized to hear of cases of failure. The neglect of parents also to have their children examined at the regular periods after inoculation, tends to bring the practice into disrepute. To obviate this inconvenience it has been the practice for some time at this Institution, to oblige parents to deposit a small sum, to be returned after the child has gone through the disease, provided they have attended agreeably to instructions, otherwise the sum is forfeited. This regulation has had the desired effect.

It was reported at an early period of the practice, that vaccination afforded only a temporary security, which was at first limited to three years. Numerous experiments, tried in different quarters satisfactorily proved the falsehood of this assertion. A similar opinion has been lately revived, but the period of security extended to five or six years. Neither analogy nor experience justifies such an idea, and the history of casual Cow-Pock, fully refutes the allegation, as numerous cases are on record of persons, after having casual Cow-Pock, resisting during a long life the Small-Pox, under every circumstance of exposure, inoculation, &c. Besides, had the preventive powers of Cow-Pock not been permanent, it is but reasonable to suppose that many of the above 12,065 must, under the existing circumstances of exposure have taken the Small-Pox. Above twenty children who were vaccinated five or six years ago, have lately, by order of the Directors, been submitted to variolous inoculation, but without the effect of producing Small-Pox. Similar experiments have been instituted, under the direction of other practitioners, with the like result. Nineteen children who had the Cow-Pock eight and nine years ago, have been lately inoculated with Small-Pox matter, at the Foundling

Hospital, under the inspection of Mr. Stewart, Surgeon-General, and Mr. Creighton, Surgeon of the Hospital, but with no other effect than local inflammation. In a letter just received from Mr. Bryce, of Edinburgh, he observes—"I have lately finished an experiment of inoculating about twenty children with the Small-Pox, who were vaccinated from eight years to five months. The result is most satisfactory, and shews clearly that a pustule with surrounding inflammation is as readily produced five months after vaccination, as at the end of eight years, consequently that the security is as complete at the latter period as the former."

The following extract from the report of the Small-Pox Hospital, London, should be recorded:—"Eleven thousand eight hundred patients, and upwards, have been vaccinated, of which number *twenty-five hundred* were afterwards *proved* to be secured from the natural Small-Pox, by receiving a further inoculation with Small-Pox matter, which took *no effect*. A number *amply sufficient to satisfy the public mind*, of the *security* and *success* of the new practice of Vaccination." *December*, 1802. So great a number submitted to the test of variolous inoculation, and exposed in a Hospital full of Small-Pox infection *without effect*, should of itself convince every reasonable mind of the efficacy of vaccination.—*Vid. Mr. Charles Murray's Answer to Mr. Highmore, p.* 37.

A report having been lately circulated, that Dr. *Jenner* himself was beginning to entertain some doubt of the efficacy of his discovery, the Directors thought it expedient to direct their Secretary to write to him, and to lay his answer upon the subject before the Public.

"*Dear Sir,*

"Your obliging Letter of the 3d Inst. enclosing the *Annual Report of the Cow Pock Institution, in Dublin,* has just reached me. The former Letter you allude to has not yet been delivered. It is with the greatest pleasure I perceive the rapid increase of vaccination in your Metropolis, and the uninterrupted success that has attended the practice, at once a proof of the zeal, industry and attention of the medical officers, for which I beg leave to make my most grateful acknowledgments.

And now, Sir, a few remarks on the very extraordinary communication you have made to me respecting Lady C———. It has been one of the usual devices of the enemies of vaccination, almost from the time of my first making it known, to represent me as having lost my confidence of its prophylactic powers, or at least, that I was wavering on the subject. Can I, who, with the aid of my nephews, have vaccinated a number of persons little short of 30,000, without one single instance of accident or of failure, that ever reached my ears, for a moment entertain such an absurd idea? Or could I have ever thought of inoculating for the Small Pox, while I hold that practice in abhorrence, and condemn it both publicly and privately? Believe me the whole story you relate to me, is an entire fiction, without the faintest shadow of foundation. Never from the commencement of my experiments to the present hour, have I used a particle of variolous matter, except for the purpose of putting some of those to a test, on whom I made my first trials. For some years past, I have relied wholly on the vaccine lymph, for *testing* those

on

on whom any material irregularity appeared in the progress of the pustule.

Believe me, &c.

Berkeley, February, 19, 1809. EDWARD JENNER."

While the Directors, with such weight of evidence in its favour, feel themselves warranted in continuing to recommend vaccination as a preventative of Small Pox, they cannot but regret that in a few cases it has been difficult to determine whether a patient has had the disease *constitutionally* or *locally*. They, however, confidently hope that by pursuing Mr. Bryce's test, and by increased attention to the progress of the disease, practitioners will be enabled to surmount the only objection to practice which tends to preserve more than 30,000 lives annually, in the British Isles.

Mr. *Bryce* proposes that, a second inoculation be performed about the sixth day after the first, the vesicle produced by this second inoculation is accelerated in its progress, so as to arrive at maturity, and again fade, at nearly the same time as the affection arising from the first inoculation. Mr. B. considers the acceleration of the second inoculation to be the effect of the constitutional affection produced by the first, and therefore if it shall be found that no such acceleration takes place, but that the second inoculation proceeds by a slow progress through all the stages, it is to be concluded, that no constitutional action takes place from the first insertion of the virus; and when this is the case, the second inoculation must be regarded as a primary affection, and a third puncture made according to the plan laid down for conducting the second inoculation, and thus, (he says) we may go on until the proper test be obtained ; or until we be satisfied that the constitution completely resists the action of Cow-Pox.

Although Small-Pox is by no means exterminated from Dublin, among the poor, yet the general substitution of vaccine for variolous inoculation, has considerably diminished the number of patients brought to the Hospitals and Dispensaries for advice. In the upper ranks of society death from Small-Pox is unheard of, and the most extensive practitioners acknowledge that a case of Small-Pox in private practice is a very rare occurrence. And although the re-introduction of Small-Pox into Society would add greatly to the emoluments both of Physic and Surgery, there is no liberal man in either profession who would not sincerely deplore such a calamity.

Signed by Order,

January 10, 1810. S. B. LABATT, Sec.

FOUND-

FOUNDLING HOSPITAL, DUBLIN, *4th* JAN. 1810.

The following REPORT having been laid before the GOVERNORS of the FOUNDLING HOSPITAL, and appearing to be highly satisfactory: ORDERED, That Three Thousand Copies thereof be printed, for the Purpose of their being circulated as generally throughout the United Kingdom as possible. By Order,

A. BAILIE, Register.

As some persons have lately attempted to prejudice the minds of the public, by representing Vaccine Inoculation as a doubtful security against small-pox, limiting its influence to a certain period, and wishing us to believe, that its preventive powers diminish in proportion to the distance of time from Inoculation. I have, therefore, at the request of the Right Honourable and Honourable the Governors of the Foundling Hospital, instituted such experiments as enable me (a second time) to congratulate the public on their successful event.

From my situation, as surgeon to the Foundling Hospital, I have had it fully in my power to select such cases as had been faithfully recorded by me to have undergone vaccination at the earliest period of Cow-Pock Inoculation in this city, and such have been approved of by those gentlemen who have honoured me with their presence, to witness and subscribe their names to the progress and event of the following experiment on nineteen children chosen for the purpose, who were divided into two classes. The first nine, comprehending those who, in a state of infancy, were vaccinated by me between the 30th December, 1800, and 3d July, 1801, now more than eight years. These were again inoculated with Small-Pox infection by George Stewart, esq. Surgeon-General, on the 24th July, 1804, (and witnessed by several gentlemen of the first respectability in their profession) in like manner to disprove the assertions of Mr. Goldson, as may be seen in the twelfth volume of the Medical and Physical Journal, and with the most complete success—all having resisted the Small-Pox, although exposed to it in every way possible. These nine children, with ten others, who were also vaccinated by me in a state of infancy, from 15th July, 1801, to 30th of August, 1802, upwards of seven years, were again submitted to Small-Pox Inoculation on Friday, 22d December last. The infection taken from a child of Mr. Stafford's, No. 7, Hanbury-lane, in confluent Small-Pox, and the matter inserted in two places in the arm of each child, in a fluid state, and in the greatest quantity. In every instance, the punctures in the arm of each child, from the third day, inflamed, and continued until the seventh, when the inflammation gradually subsided, as certified by Mr. Stewart, and marked in a table, which, in another publication, will be more fully expressed; which circumstance has proved the activity of the Small-Pox matter inserted, and which must have affected the constitution, was it in the least susceptible of the disease. Fourteen days have now elapsed, the inflammation of the punctures is entirely gone, and never was attended with the slightest *fever*, *sickness*, or *eruption*.

In corroboration of the above facts, conducted with every degree of accuracy,

accuracy, and which cannot admit of the smallest doubt on the minds of those gentlemen who have witnessed them, and hereunto subscribed their names; I can safely assert, that I have submitted upwards of five hundred infants and children, vaccinated by me at this Institution, and at the Dispensary for infant poor and Cow-Pock Inoculation, as established in the year 1800, to a like experiment, and with the same result in every instance.

DUBLIN, MERRION-SQUARE, WEST, JANUARY 4, 1810. J. CREIGHTON.

George Stewart,	*Ralph S. Obre,*	Members of the Royal College of Surgeons in Ireland.
Will. Hartigan,	*Gustavus Hume,*	
A. Colles,	*Phil. Crampton,*	
S. Wilmott.		
Edmund Connell,	*William Dillon,*	Apothecaries.
Samuel Bell,	*J. Mc. Creight.*	

Fourth Annual Report of the Nottingham Vaccine Institution.

THE preceding reports have not only traced the progress of the Institution from the establishment in 1805, but have presented to the public authentic and incontrovertible documents in support of vaccine inoculation; and the directors fully confirmed in the opinion of its efficacy, again, in this their fourth report, conscientiously recommend it as a safe and certain practice to eradicate that destructive pestilence the small-pox. Four children were in the months of May, June, and July last, attacked with this highly infectious disease, in consequence only of their inhabiting houses in which the contagion had remained since the epidemic of last year; this most clearly shews the necessity not only of cleaning all the furniture, but of lime-washing the apartments of every house in which the small-pox has appeared, and more particularly when about to be occupied by a fresh tenant. The disease was in another instance introduced by a stranger from London, but in this, as well as in the former cases, it was prevented from spreading, by vaccinating all the individuals exposed to its baneful influence; thus by the powerful and salutary agency of vaccine inoculation the small-pox was confined to the subjects it first attacked.

The vaccinations up to the last report, in October 1809, were 3004; to these may now be added 307. This is apparently a small number, but when we reflect on the great prevalence of scarlet fever during the last six months, it will be obvious, that the practice must have been much restricted, as it is a principle of this Institution not to inoculate children either affected with or suffering from fever, except under very particular circumstances, which are always noted in the register.

The following then is the present state of the Register:

2787	Satisfactory or perfect vaccinations,
332	Doubtful, or unsatisfactory vaccinations,
173	Blank, or those where the inoculation did not take effect,
19	Under progress of vaccination.
3311	Total of persons inoculated for cow-pock.

The division of cases into four heads has been too often explained to require any comment, further than our decided approval of the distinction which has been thus drawn from the first, and our conviction that it not only facilitates, but gives precision to the practice.

This Institution, founded and supported by benevolence, can only be efficient whilst it receives the protection of the public; it requires but little, but that little is necessary to its existence, yet the good effected by such small means is beyond calculation; and the benevolent, who have hitherto given this protecting shield to the poor, will, we are fully persuaded, still advance an arm for its support.

By order of the Directors,

GEORGE COLDHAM, Secretary.

Nottingham, Oct. 18, 1810.

(From the London Medical Review for October 1810.)

Effect of a Ligature on the Iliac Artery.

The remarkable effect which follows the application of a ligature to an artery, and its subsequent removal, as mentioned by Dr. Jones in his Treatise on Hæmorrhage, has lately been exemplified in the human subject. The particulars of the case, as far as we have been able to ascertain them, are as follows. A man underwent the operation of castration; the arteries were separately tied; in a few hours afterwards one of the ligatures came away, and a profuse hæmorrhage followed. Various means were used to restrain the bleeding, but it recurred at different periods for several weeks. The spermatic chord was followed by a dilatation of the abdominal ring, and pressure by means of a spring truss employed with as much force as could be borne. At the expiration of some weeks from the application of the truss, a violent hæmorrhage took place from a very large vessel passing from the thigh in a direction upwards and inwards. In this emergency the external iliac artery was exposed by an incision. A ligature was placed around it, and when drawn tight the hæmorrhage ceased. In a few minutes the ligature was removed, and the circulation was observed to be distinctly carried on in the artery below the part where the ligature had been applied. A slight hæmorrhage took place afterwards, but the wound did well, and had granulated and nearly healed, when the patient was destroyed by a pulmonic disease. Upon dissection, the external iliac artery was found completely obliterated for the space of three inches, extending from the origin of the internal iliac to the point where the vessel passes under Poupart's ligament. It should be observed that the vein in the same situation was likewise obliterated by a very firm plug of coagulum. It may be a question in this case, since the coagulum was extensive and the vein participated in the obliteration, in what degree the pressure applied influenced the appearances.

Dilatation of the Male Urethra.

A boy aged four years, laboured under suppression of urine. He had always borne the appearance of a cripple; his lower extremities were

were small and crooked. On attempting to introduce a catheter, it was obstructed by a calculus, lying in the membranous part of the urethra. The surgeon, whose name we have no authority to mention, with some difficulty introduced a very small one, and drew off his urine. He then introduced a sponge tent into the urethra, and allowed it to remain there until the next day, which operation he repeated, increasing the size of the tent daily, for about a fortnight, at which time the passage was so much dilated as nearly to admit of the introduction of the little finger. One morning, in making an effort to void his urine, a calculus of the size of a large nutmeg was discharged; and on the following day, two more of the same size. In a short time the boy gained strength and the perfect use of his limbs, as well as the power of retaining his urine. The tents employed were in the form of bougies, which were made by rolling together long strips of well prepared sponge. The calculi are of an irregular wedge-like shape, with their sides flattened and rendered smooth by contact, weighing, on an average, from 60 to 70 grs. each. We consider this case as highly important, and very creditable to the gentleman who conducted it.

Longevity and Hybernation of the Testudo Græca.

"THERE is now living in the garden belonging to the Bishop's Palace, at Peterboro', a land *Tortoise*, which is ascertained to have lived there 200 years. The upper shell is near 14 inches long, 9 broad, and the weight of the animal is 20 pounds. It has lost the sight of one eye, the other is bright and lively: the inside of the mouth as well as the tongue, is a full pink colour. The legs, feet, and head are covered with scales. In the early part of the summer, it in general feeds upon lettuce; but gathers up fallen fruit, especially goosberries. Towards Michaelmas, and sometimes earlier, it buries itself in the earth, where it remains till the following spring. In a few days after it has made this annual descent, by finding the depth with a stick, a tolerably accurate judgment may be formed of the mildness or severity of the ensuing winter."

There are circumstances in this account of great interest to the naturalist, especially the extreme longevity of this animal. We may be allowed, however, to doubt the accuracy of the relation that states it to have existed upwards of 200 years; and to hope that some of our correspondents at Peterboro', or the vicinity, will take the trouble to ascertain the real fact.

We suppose this animal to be the *Testudo Græca*, a creature extremely tenacious of life, suffering the most violent mutilations, and extraordinary privations, without being destroyed. This species of tortoise has been considered as arriving at a very extended longevity. *M. Cetti* saw one in Sardinia which had lived sixty years in one house, where it was considered as an old domestic. Its power of surviving the loss of organs, which have been considered as essential to the continuance of life in other animals, has been ascertained by a series of experiments made by Sig. Redi. In the month of November he made a large opening in the skull of a *Testudo Græca*, and removed the whole substance of the brain, cleansing out the cavity with great care. The eyes of the animal instantly closed, and never afterwards opened; but being set at

 liberty,

liberty, it continued to walk about as well as before the brain was taken away. In three days the wound was covered with new skin, and the tortoise lived, and continued all its ordinary motions, till the middle of May, nearly six months after it had been deprived of its brain. After death, only a small black clot of dry blood was found in the cavity, from which the brain had been taken out. He repeated this experiment on several tortoises, both land, fresh water, and even the sea species, and they all continued to live, for longer or shorter times, after losing their brain. Another remarkable property of the genus *Testudo* is, that the individuals of it can live a long time without food. *Gerard Blasius* kept a *Testudo Græca* ten months without food, and then it died, not from inanition, but from excessive cold. The intestines of this were found full of excrementitious matter.

The genus *Testudo*, in some of its species, is common to all the warm and temperate countries of the old world. It is found in Southern Europe, in Amboyna, Ceylon, Japan, Bourbon, and India; also in the desert parts of Africa. There is some doubt whether the land tortoise is indigenous to America, or has been transported thither from the old world.

The Middlesex Hospital, which had long laboured under great difficulties, for want of Funds, has lately met with extraordinary support, from the liberality of the Public, and of private Individuals. By the Benefit concert, which was given at the Opera House about eighteen months ago, through the kindness of Mr. Taylor, it cleared upwards of two thousand pounds; an unknown Gentleman has, since that time, called at the Hospital, and left one thousand three hundred and twenty pounds with the Secretary, and Mrs. Stafford, a Lady, residing in Hill-street, Berkeley-square, has within the last six weeks left by will five thousand pounds to the Cancer Fund, and one third of her residuary property, to the general purposes of that Hospital: this third, it is supposed, will produce nearly eight thousand pounds; it is to be hoped, therefore, that this large and well constructed Hospital, will soon be in a condition to give relief to all the poor objects that may want its charitable assistance; of late years great numbers have been denied admittance on account of the poverty of the Institution.

Dr. Clough, Physician, Man-midwife to the St. Mary-le-bone General Dispensary, will, on Monday the 14th of January, 1811, at Ten in the Morning, commence his Second Winter Course of Lectures on the Science of Midwifery, including the Diseases of Women and Children, at his Lecture-room, 68, Berner's-street, where Syllabusses and Prospectuses may be had. N. B. His evening course is continued, as usual, on Tuesdays, Thursdays, and Saturdays, at the hour of Seven, during the Winter.

Dr. George Rees is preparing for the press a new edition of his book on Disorders of the Stomach, in which many additional cases and important observations will be introduced.

A Treatise

A Treatise on some practical Points relating to the Dis... Eye, by the late J. C. SAUNDERS, esq. is in the press. It ... illustrated by coloured engravings, and contain a short accoun... the author's life, with an engraving from a portrait by Devis.

Dr. HOOPER will, in a few days, publish the first fasciculus of his long promised Anatomical Atlas.

MONTHLY CATALOGUE OF NEW MEDICAL PUBLICATIONS.

Remarks on the Nomenclature of the New London Pharmacopœia, read before the Liverpool Medical Society. By John Bostock, M. D. 8vo. Callow.

Observations on the Cure of Cancer. By Thomas Denman, M. D. 8vo. Johnson.

An Enquiry into the Causes producing the extraordinary Addition to the Number of Insane, together with extended Observations on the Cure of Insanity; with Hints as to the better Management of Public Asylums for Insane Persons. By W. S. Hallaran. 8vo. Longman and Co.

On the Morbid Sensibility of the Eye, commonly called Weakness of Sight. By John Stevenson. 8vo. Highley.

A Popular Essay on the Structure, Formation, and Management of the Teeth; Illustrated by Engravings. By John Fuller. 8vo. Sherwood and Co.

Facts and Opinions concerning Diabetes. By John Latham, M. D. 8vo. Murray.

The Elements of Chemistry. By J. Murray. 2 vols. 8vo. Underwood.

The London Medical Review, No. 12. No. 13 will be published in January. Underwood.

Pharmacopœia Officinalis Britannica, being a new and correct Translation of the late Edition of the London Pharmacopœia, with which are incorporated, in Alphabetical order, all the Formulæ of the Edinburgh and Dublin Colleges; together with Notes Explanatory of the different Processes. By Richard Stocker. 8vo. Cox.

Illustrations of Madness: exhibiting a singular case of Insanity, and a no less remarkable Difference in Medical Opinion; developing the Nature of Assailment, and Manner of Working Events; with a Description of the Tortures experienced by Bomb-bursting, Lobster-cracking, and Lengthening the Brain. Embellished with a curious plate. By John Haslam, 8vo. Rivington's.

The Elements of Experimental Chemistry. By William Henry, M. D. F. R. S. 2 vols. 8vo. Johnson.

First Lines of the Practice of Physic. By William Cullen, M. D. including the Definitions of the Nosology, with Supplementary Notes. By Peter Reed, M. D. 2 vols. 8vo. Underwood.

MONTHLY BOTANICAL REPORT.

OUR last Report being occupied by an account of the Hortus Kewensis, the periodical works on Botany were necessarily neglected. We shall now proceed to notice the four last published numbers of the Botanical Magazine. We shall enumerate all the plants in Mr. Ker's* department in succession, without interrupting the series by those of Dr. Sims.

Alöe *arborescens*, the tree aloe; one of the most gigantic of the species, but which was considered by Linnæus as a variety of *perfoliata*.

Alöe *arachnoides*, var. *reticulata*. This is one of the most diminutive species, nearly allied to the Cushion Aloe.

One can hardly conceive that these two plants can be properly united under one genus, differing so much as they do in habit, in foliage, and in the form, as well as colour of the flower. The genus ought, if not entirely separated, to be divided into sections.

Alöe *lingua*; the tongue-Aloe. All these three afford examples of as many different sections, if not of distinct genera.

Alöe *picta*. This would fall under the same section as *arborea*; as the next, Alöe *carinata*, would unite with *lingua*.

Alöe *depressa*. This species was considered by Linnæus as a variety of *perfoliata*, and would consequently be arranged under the first-mentioned section. To this plant an outline of a diminished figure of the whole plant is added. This is a most useful addition; without which the full-sized representation on so small a plate can hardly convey an intelligible idea of such very large plants. We can but wish that this method had been more generally adopted in cases where a small portion of a plant is insufficient to give a proper notion of the whole. We are happy to receive so many representations of succulent plants, which, hardly admitting of being preserved as dried specimens, are, on that account, more particularly desirable.

Hæmanthus *puniceus*. In a former number, Mr. Ker had observed, that Hæmanthus *multiflorus* probably did not properly belong to this genus; but he here acknowledges that it bears a red berry, which corresponds with the rest of the genus, and, in consequence, desires his former observation to be annulled.

Medeola *virginiana*. The roots are said to be eaten by the Indians, and to have a taste like cucumber.

Anthericum *alöoides*. Mr. Ker has elsewhere remarked, that this genus requires reforming and separating. The one here figured, *frutescens* and *longiscapum* of Jacquin, are all three closely allied, are natives of the Cape of Good Hope, and have yellow flowers and succulent leaves.

---

* This botanist being every where quoted by his present name in the Hortus Kewensis, we shall in future follow this example, and drop that of Gawler, though the letter G still continue to point out his articles.

Allium

Allium *cernuum*. There is a singularity in the form of germen in this species, which we do not recollect to have seen described in any other; it is triangular, and the angles are elongated at the top of the germen into a bifid process.

In a note added to this article, Mr. Ker remarks, that Allium *striatum* is not a native of the Cape, as he had before stated it to be on the authority of Jacquin, but of North America; and that Ornithogalum *vivalve*, of Linnæus, is the same plant.

Albuca *vittata* appears to be a species not before described.

Allium *flavum*. Yellow flowers are uncommon in this genus; this and *moly* are the only ones we recollect. Mr. Ker, in a former article, No. 1143, corrected a mistake that he had fallen into at No. 973, in giving a wrong plant for Allium *paniculatum*. He now directs, that the observation there made, that "the pedicles are intermixed with small round bulbs" should be expunged, as it belongs to *oleraceum*, between which and *paniculatum*, these bulbs are one of the chief distinctions.

In the above enumeration, we have brought all the aloes together, though intermixed with the other plants in the publication.

In Dr. Sims's department in the same four numbers, we find:

Phlox *pilosa* and *amœna*, two nearly allied species; the former is supposed to be the *aristata* of Michaux, and the latter his *philosa*. Both these plants were introduced by Mr. Fraser, of Sloane-square, who, it is here remarked, has made seven voyages to North America, for the laudable purpose of increasing our knowledge in the vegetable productions of that part of the world.

Claytonia *alsinoides*. This species, according to Dr. Sims, is distinct from *sibirica*, for which it has been generally taken. Introduced from Nootka Sound, by Mr. Archibald Menzies.

Goodlo *pubescens*. A decandrous papilionaceous plant, from Van Diemen's Island; which country being subject to a frost, it is probable, that its vegetables will be found sufficiently hardy to endure our winters without shelter.

Lupinus *Nootkatensis*. Another discovery of Mr. A. Menzies, on the north-west coast of America, and already become very common in our gardens.

Othonna *amplexicaulis*. From the singularity of its foliage, this plant makes a very picturesque drawing. It is a rare species, and was communicated by Mr. Knight, nurseryman, King's-road, Chelsea.

Billardiera *mutabilis*. An elegant little shrub from New South Wales.

Lonicera *flava*. Supposed to be a new species of woodbine, from North America, discovered by Mr. Fraser, of Sloane-square.

Lobelia *lutea*; from the Cape of Good Hope. Dr. Sims queries whether this properly belongs to the genus lobelia; to us the reversion of the flower does not seem at all sufficient for a separation; neither is this singular, we know at least of one other species, in which the same take place; and in this species, likewise, the tube is nearly, if not altogether, wanting.

Mantisia

Mantisia saltatoria. This is one of the most singular acitamineous plants we have seen. It is at the same time very beautiful. The airy-looking party-coloured *corollas*, have been fancifully compared to dancing girls. Dr. Sims thought it resembled the insect called mantis, whence his generic name. But adopting at the same time the former notion he has given it the specific name of *saltatoria:* and in English has called it opera girls. Though we were at first somewhat shocked at so whimsical and apparently unscientific a name, yet upon further consideration we do not see much to object to in it. Hitherto no attempt has been made to reduce the English names to a scientific form, and whilst ladies-tresses, friars-cowl, Jupiters distaff, love-lies-bleeding, fresh-water-soldier, fair-maids of France, are to be found in the most scientific catalogue that this country has produced, we need not be over fastidious. We might perhaps go farther, and maintain that as names taken from a fancied similarity when converted into Greek, rank with the best, why should they be despised when purely English? In our opinion ladies-slipper is in no respect inferior to cypripedium; nor would orchestridia be better than opera-girls.

In Dr. Roxburgh's essay on the scitamenia, this plant is referred to the genus globba, with which it is certainly a near affinity, but in our opinion, Dr. Sims's reasons for separating it are quite sufficient.

Cluytia *alaternoides.* A plant of no great beauty, but no intelligible representation of it was before extant. This name was originally *clutia*, and was given by Boerhaave, in honor of a Dutch professor, Cluyt; and very properly changed by Mr. Dryander to *cluytia*, which, while it agrees better with the botanist's name prevents its being confounded with *clusia.*

Lobelia *gigantea.* This has been supposed to be the *tupa* of Feuille, one of the most poisonous plants upon record; smelling to the flowers, proving, according to the Holy Father, violently emetic; and rubbing the eyes with the fingers, accidentally smeared with the juice, infallibly destroying the eyes. Dr. Sims, indeed, found no inconvenience from dissecting, as well as smelling to the flowers of this plant; which, however, he has given good reasons for supposing not the same species as the one described, and figured by Father Deuillee.

Stapelia *gemihata.* This has been before figured by Masson, but Mr. Edward's drawings are so superior, that we cannot call them superfluous.

Potentilla *clusina.* The petals are not so round in this as in Jacquin's figure, and are abcordal, in which respect Clusius's own figure corresponds.

Menyanthes *sarmentosa.* A water plant from New South Wales.

Panax *quinquefolia.* The celebrated Ginseng of the Chinese; so famed through China and Japan for its medicinal virtues, particularly as a restorative; and so totally neglected by the medical practitioners of Europe, though easily attainable from North America.

Panax *pusilla.* This is a much smaller species than the last, and has a round root, very like a small potatoe.

Fumaria *fermosa.* This is a third plant occurring in this report, and another still remains, which was introduced from the north-west coast of America, by Mr. Archibald Menzies, and a very valuable addition to our gardens it seems to be; being easily propagated perfectly hardy, and very beautiful, both in foliage and flower.

METEOROLOGICAL TABLE.

From Oct. 29, to Nov. 27.

D	Therm.			Barom.			Hygrom. dry			damp.			Weather.
29	70	43	36	29^{6}	29^{7}	—	—	—	10	—	—	—	clear . * — . . . — . . . .
30	37	42	36	29^{8}	29^{9}	—	—	—	—	27	—	15	Snow . . clear . . . — . . . .
31	35	43	44	30	29^{9}	29^{8}	—	—	—	15	10	28	fog . . cloudy . . rain .
1	49	47	42	29^{7}	29^{6}	29^{7}	—	—	—	27	22	—	cloudy . . rain . cloudy . . .
2	41	47	42	29^{9}	—	—	—	—	—	30	—	27	rain . —— . cloudy .
3	45	47	45	29^{9}	—	—	—	—	—	25	15	10	rain . —— . —— .
4	44	46	41	29^{8}	—	—	—	—	—	35	20	—	Rain . . —— . clear . .
5	37	41	42	99^{6}	29^{5}	29^{2}	—	—	—	24	15	25	cloudy . . clear . rain in night
6	41	43	40	—	29^{1}	—	—	—	—	30	—	20	clear . . rain . . clear . . r. in n.
7	40	41	—	29	—	—	—	—	—	30	25	20	rain . . cloudy . . rain . r. in n.
8	53	—	40	29^{1}	—	29^{4}	—	—	—	25	—	22	rain . . — . . — .
9	40	43	41	29^{5}	—	29^{4}	—	—	—	25	—	26	clear . — . . — . . . r. in n.
10	45	47	46	28^{9}	28^{6}	28^{8}	—	—	—	30	25	20	rain . . . — . . . . clear . . halo
11	45	46	43	29^{2}	29^{4}	—	—	—	—	30	25	20	cloudy . . . . rain . . — . r. in n.
12	45	46	41	29^{5}	—^{0}	8	—	—	—	95	20	25	clear . — . . rain . clear . . . .
13	40	43	41	30	—^{2}	—^{1}	—	—	—	25	17	21	clear . . . . — . . . . . — . .
14	40	42	43	30	29^{8}	—^{5}	—	—	—	20	—	27	cloudy . . rain . . — . . . r. in n.
15	51	55	54	29^{5}	—	—^{4}	—	10	4	15	—	—	clear . — . . rain . . . .
16	53	55	52	29^{3}	—	—^{2}	2	15	10	—	—	—	clear . — . . rain . . .
17	50	51	48	29^{3}	—^{4}	—	10	20	15	—	—	—	clear . . — . . . — . . r. in n.
18	47	50	49	29^{5}	—^{6}	—^{5}	19	30	25	—	—	—	clear . . . cloudy . . . rain . . .
19	50	—	47	29^{5}	—^{6}	—	15	20	—	—	—	10	cloudy . . rain . . — . .
20	46	47	49	29^{6}	—	—^{5}	—	—	—	8	10	19	cloudy . . — . . rain . . in n.
21	51	55	50	29^{5}	—^{4}	—^{5}	—	—	—	40	50	43	rain . . clear . rain . . .
22	43	47	49	29^{5}	—^{7}	—^{8}	—	—	—	30	—	38	clear . . hail . . . . rain . .
23	48	52	49	29^{8}	—	—	—	—	—	35	25	35	clear . — . . . . rain . .
24	50	51	48	29^{7}	—^{6}	—	—	—	—	38	—	40	fog . . . rain . . rain . . .
25	46	49	45	29^{5}	—	—	—	—	—	38	39	36	clear . . rain . . . — . .
26	45	46	45	29^{3}	—^{2}	—	—	—	—	38	40	37	cloudy . . . . rain . . . — . .
27	43	48	47	29^{2}	—^{1}	—^{0}	—	—	—	40	—	41	cloudy . . clear . . cloudy . .

15. Sensible temperature like Midsummer.

16. ———————— much lowered.

15, 16, 17, 18, and 19. The humidity of the atmosphere, as indicated by the hygrometer, changed from considerable dampness during the early part of the month, to a high degree of dryness; and on the 20th returning to an increased humidity. The hygrometer employed was made by Adams, of the *arista* of the wild oat, and was placed in the open air, but sheltered from rain. The apparent state of the atmosphere gave no indication of this variation in the degree of aqueous solution; nor is there any cause to think that the instrument did not act correctly, as far as its powers go.

22. Stormy showers. Three P. M. heavy fall of hail covering the ground, but soon dissolving: wind S.W. . . . succeeded by a starry evening. On the 30th of October, the approach of winter seen by the first fall of snow.

Pince's-Street, Cavendish-Square, Nov. 29, 1810.

* The degree of any state of the weather is indicated by a number of points added to the description. Thus *clear* . is the first approach to a bright atmosphere; *clear* . . . . indicates its most unclouded state.

NOTICES TO CORRESPONDENTS.

We are much obliged to our old and valuable correspondent Mr. Goodwin for his interesting communication. We had heard of the ravages of Scarlatina Maligna in various districts, but were not aware, that they had been so extensively fatal as our correspondent narrated. We do not presume to dictate any mode of treatment, but as that which Mr. Goodwin pursued, and which indeed has been recommended bythe best practical writers on the subject, in many instances failed, and in none seemed to be beneficial, we suggest the propriety of directly reversing it, of strictly enforcing what is termed the antiphlogistic plan; and more especially in the commencement of the disorder, administering purgatives, and applying the cold affusion. On this important and interesting snbject, we earnestly solicit communications from practitioners who have tried the effect of this practice in the more severe forms of the disease. We also wish them to direct their attention to any local circumstances which might influence the fatality of a complaint, which in many instances is extremely mild, and in others again, running its course with rapidity, assuming the most malignant character, and resisting the effect of remedies.

We are obliged to "*Socrates*" for his hints, and when he is better acquainted with us, hope that he will not dispute our intention of performing our duty to the public with fidelity.—Upon referring to the Gentleman's Magazine for September 1762, we could not find the case of Premature Puberty to which he alluded.

We have to acknowledge communications from Dr. Arnold, Dr. Hamilton, Dr. Clough, Mr. Goodwin, Mr. Kenworthy, and Mr. Chamberlain, which will appear in our next number.

END OF VOL. XXIV.

Printed by E. Hemsted, Great New Street, Fetter Lane.

Med.l Journal, No. 177. P. 353.

Case of Tumor on the Neck.

Published Nov.r 1813. by J. Souter Paternoster Row London.

Engraved by R. Cooper.